



Hampshire and Isle of Wight
**Children and Young
People's Mental Health
and Emotional Wellbeing**
Local Transformation Plan (LTP)
2019 Refresh DRAFT



Foreword

In Hampshire & Isle of Wight, we are passionate about the wellbeing of our children and young people and their families. We want children and young people to be safe, happy, resilient and able to reach their full potential, and experience good emotional wellbeing and mental health, both now and in the future.

This plan sets out how we will continue to improve mental health and emotional wellbeing support for all children, young people, families and carers across Hampshire and the Isle of Wight building on the Emotional Wellbeing and Mental Health strategy 2019-2024, which has recently been developed in partnership with a wide range of professionals and young people.

In 2015, Hampshire and the Isle of Wight were given government funding to improve access to mental health services for children and young people. This money was given to all CCGs across the country and was linked to the Governments Future in Mind strategy¹.

Each local area was asked to produce a 'Local Transformation Plan' and review and refresh it each year, to evidence that services are improving and that access is increasing.

This 2019 refresh is a little different than previous years and is the very first joint Hampshire and Isle of Wight plan. We have written this plan with more input from other professionals across health, local authority and education. We have compared our data,

our challenges and our successes. We have developed joint meetings and piloted new services to meet the needs of children and young people but most importantly we have included the views of children, young people and their families.

We truly want the best for our children and young people and will make sure that we support the delivery of high quality services. We want to reduce waiting times, provide help and support much earlier and continue to improve the way services work together.

We know that there is a lot of work to be done. We understand the areas that we haven't got quite right yet and will continue to listen to ensure that all children and young people get the right help, at the right time and in the right place.

1. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf

Contents

Executive Summary	4
Introduction.....	6
What difference have we made so far?	8
Vision and Strategic Context.....	10
The Needs of Our Local Population	18
Engagement with Children and Young People	28
Performance and Service Activity	35
Transformation plan Investment and Progress so far.....	51
Achieving Our Local Priorities	54
What are our risks and what are we doing about them?.....	80
Accountability and Transparency.....	84
KLOEs Summary	85
Glossary	86

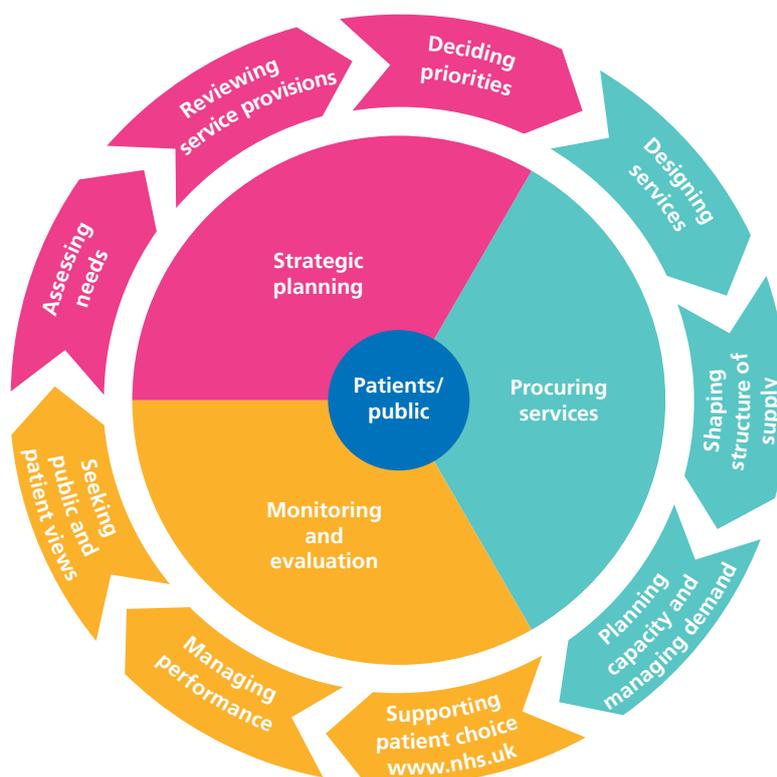


Executive Summary

The Children and Young People's Mental Health and Emotional Wellbeing Local Transformation Plan is an evolving plan which has been in place since 2015, is refreshed every year and evaluated by NHS England. The 2019 plan is the first to cover both Hampshire and the Isle of Wight. The plan sets out the needs of the local population which supports commissioners to ensure that fit for purpose services are identified, introduced and reviewed, using the commissioning cycle:

The concept of commissioning was introduced into the NHS in the early 1990s, when reforms separated the purchasing of services from their delivery, creating an 'internal market'. It was argued that making providers compete for resources would encourage greater efficiency, responsiveness, and innovation. These arrangements have evolved since their introduction, including through numerous changes to the structure and remit of the organisations that commission care. The current arrangements were introduced by the Health and Social Care Act 2012.

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Across the NHS, commissioning models are changing to reflect the increasing move towards joint working between different commissioning organisations, local authorities and providers to deliver better coordinated services.

This document sets out our performance against national ambition and highlights the links between Hampshire and Isle of Wight system wide strategies and our own local priorities. Our three key priorities are:

- Reducing waiting times for Tier 3 Children and Adolescent Mental Health Services
- Investing into prevention and early intervention support services
- Developing accessible services by exploring digital and innovative solutions

We are very proud of our services and workforce who consistently go above and beyond their remit to ensure that children and young people remain safe in challenging circumstances where funding is limited and demand for services continues to increase. We know that more needs to be done and we will continue to work hard to identify opportunities for joint commissioning with our partners to ensure that resources are used as effectively as possible.

We know that this plan will continue to evolve. Over the next 12 months we will work with our Local Authority colleagues to increase our knowledge of local need and improve our reporting processes to ensure that the right data is captured and analysed. We want to be able to accurately describe the 'Journey of the Child' as they pass through different services, creating an integrated pathway which delivers the best possible outcomes for children and young people which are measurable. We will enhance our ability to effectively analyse both quantitative and qualitative data and feedback to understand the impact we are making to children and young people in order to continue to improve services.



Introduction

The 2019 refresh marks the first joint Hampshire and Isle of Wight plan and reviews progress made over the past year and the next steps to continue to improve the emotional and mental wellbeing of our children and young people in line with the recommendations of Future in Mind and the NHS Long Term Plan published in 2019. Our commitment to achieving national objectives is supported by the following local strategies.

- Hampshire Health and Wellbeing Strategy, 2019-2024
- Emotional Wellbeing and Mental Health Strategy for Children and young people in Hampshire – 2019 - 2024
- Hampshire’s Children and Young People’s Plan 2018 - 2020
- Hampshire: a safe place to learn, a safe place to grow. LGBT+ guidance for schools and colleges, June 2018
- Isle of Wight Health and Wellbeing Strategy 2018 - 2021
- Isle of Wight Children and Young People’s Plan 2017 – 2020
- Isle of Wight Early Help Strategy 2018-2021
- Improving access to effective support – a system without tiers: changing the way services are delivered to be built around the needs of children, young people and families;
- Care for the most vulnerable: developing a flexible, integrated system without barriers;
- Accountability and transparency: developing clear commissioning arrangements across partners with identified leads;
- Developing the workforce: ensuring everyone who works with children, young people and their families is excellent in their practice and delivering evidence-based care.

Children’s mental health and emotional wellbeing continues to be a key strategic priority for Hampshire and Isle of Wight Commissioners. It is central to giving children and young people the best start in life. We remain committed to delivering the following Future in Mind priorities:

- Promoting resilience, prevention and early intervention: acting early to prevent harm, investing in early years and building resilience through to adulthood;

During 2019, we have been successful in a bid to develop two Mental Health Support Teams in schools and colleges as part of the Wave 2 trailblazers - A Government led (and funded) initiative for expanding access to mental health care for children and young people which will deliver evidence-based interventions for mild to moderate mental health and emotional wellbeing needs; to maximise the opportunity for our young people to thrive and flourish in their academic and personal lives. This is

an exciting opportunity to further develop relationships with education settings, improve the range of interventions available and develop the whole school approach to improve the emotional and mental health of children and young people.

In addition, we were also successful in bidding for funding to improve access rates for the 'Avoidant Restrictive Food Disorder' (ARFID) patient group. This will help improve the waiting time targets for Children and Young People with Eating Disorders (CYP ED) as well as those CYP with ARFID which will support the national target of improving access to mental health services to CYP overall. We were also awarded funding to pilot a number of digital and crisis support projects, that we will evaluate to measure impact and outcomes.

Our joint strategic priorities (Emotional Wellbeing and Mental Health Strategy for Children and Young People in Hampshire 2019-22) to implement Future in Mind and improve the social, emotional and mental health of our children and young people are:

1. Children and young people's emotional wellbeing and mental health is everybody's business
2. Support for good mental health of parents
3. Whole school /educational settings approach to mental health
4. Supporting mental health of vulnerable children and young people
5. Reducing rates of self-harm
6. Improvement of service provision.
7. Improving access and waiting times for Child and Adolescent Mental Health Services

What difference will this make?

- Children and young people's needs will be identified and responded to much earlier, reducing complex conditions and episodes of crisis;
- Parents and Carers will feel better supported, confident and equipped better manage distressed behaviours in the home;
- Schools will be upskilled to offer support that compliments home-based interventions;
- Children and young people will achieve better outcomes educationally, emotionally and socially;
- Children, young people, parents and carers will be able to access support in a timely manner
- Reduced transitions to adult services;
- Reduced attendance at Accident and Emergency (A&E) departments;
- Access to mental health support in schools and other early interventions settings will reduce referrals in specialist mental health services to allow focus on complex and urgent cases as well as reduce long waiting times;
- Children, young people, parents, carers and professionals will have access to seamless support services that are able to provide appropriate interventions in a timely way.

What difference have we made so far?

Three key elements help us to improve services for children and young people:

1. Local Need (pages 18 to 27)
2. Activity and Performance (pages 35-50)
3. What Children and Young People tell us (pages 28-34)

<p>Local Need</p>	<p>We understand the areas in which we need to focus services to meet the needs of vulnerable children, those living in deprivation and those that don't meet the thresholds of specialist CAMHS support but still need intervention and support:</p> <p>Havant and Gosport have been identified as areas of severe deprivation. In addition, waiting lists for CAMHS support in Havant is one of the highest in the area. The Isle of Wight has been identified as having a lack of crisis provision.</p>	<p>Our Mental Health Support Teams pilot is being delivered in Havant and Gosport to support children and young people within schools settings, to provide mental health intervention much earlier and potentially reduce the rate of referrals into CAMHS.</p> <p>We have introduced two Safe Havens in Havant and on the Isle of Wight for children and young people, to provide a safe place in times of crisis.</p> <p>We have commissioned The Isle of Wight CAMHS team to work with the current all age single point of access crisis service to develop an out of hours home treatment crisis service for children and young people.</p> <p>We are introducing ThinkNinja; a free smart phone app designed to support emotional wellbeing which can be stepped up to CBT based therapy via text message or skype. The provider has introduced the app and delivered related training to over 40 schools in the South East area of Hampshire as well as local GP surgeries.</p> <p>Children on the Isle of Wight have been introduced to the app and have expressed a desire to be able to use it. Commissioners are considering how this can be done.</p>
<p>Activity and Performance</p>	<p>Current waiting times for Child and Adolescent Mental Health Services are unacceptable.</p> <p>Until April 2019, children, young people and families on the Isle of Wight:</p> <ul style="list-style-type: none"> • Could only access parenting support if a child was diagnosed with Autism Spectrum Condition. • Had to be discharged from counselling following 6 sessions, regardless of need. • Weren't granted access to counselling services within 6 months of discharge. • Could not access Occupational or speech and language therapy without a diagnosis of autism Spectrum Condition 	<p>An independent Demand and Capacity Peer review of Hampshire CAMHS has taken place. This has demonstrated the need for increased investment in order to reduce waiting times. A stakeholder workshop has also taken place to inform a plan to improve waiting times</p> <p>From April 2019 children, young people and families on the Isle of Wight:</p> <ul style="list-style-type: none"> • Can access parenting support without a diagnosis. • Will be provided with as many counselling sessions as needed – managed by the provider and monitored by commissioners. • Can enter into any counselling services at any time, depending on need. • From April 2020: • Occupational Therapy and Speech and Language therapy will be provided based on need rather than a diagnosis.

What Children and Young People tell us

Children and Young People:

Don't want to be treated in hospitals or other clinical environments for mental health or emotional wellbeing needs

Want services to talk to one another and provide seamless pathways

Want to be listened to all the time and not just when we 'need' information.

Want somewhere safe and welcoming to go in times of crisis. 'Not a hospital'

Want to be able to get help when they need it without having to wait long periods of time with little or no help.

Assessment clinics for Autism on the Isle of Wight are delivered in family centres. From the 1st April 2020, assessments will also be carried out in schools. We have been innovative with our approach and have also been offering Skype based Autism assessments, so children and families can have their diagnosis undertaken in the comfort of their own home.

In Hampshire the Autism provider has increased the number of locations from 1 to 3 across Hampshire giving easier access closer to home and will continue to increase locations.

Hampshire CAMHS have main offices based centrally within each of the CCG areas.

We have expanded our Safe Haven provision from one to three in Aldershot, Havant and the Isle of Wight, where young people have open access to a safe place and someone to talk to when they need it

We have commissioned Think Ninja to act as an instant form of early intervention and support.

The Hampshire CAMHS service have been proactive in delivering a wide range of innovative sessions for young people such as FitFest, PACE and ICE, all designed to provide a safe place for young people to explore how they are feeling, express this and get the help and support they need.

Hampshire CAMHS have also worked with young people to design and develop their website which has interactive parts to reduce the fear and provide advice, guidance and support for young people and their families.

The CCGs recognise that more funding is required, and working with our third sector such as No Limits and Barnardo's is vital to ensure timely access to services.



Vision and Strategic Context

National vision

This plan is informed by and consistent with the strategic vision set out in national policy and best practice, including Future in Mind 2015, the Five Year Forward View for Mental Health, National Child and Adolescent Mental Health Green Paper 2018 and more recently the NHS Long Term Plan, all of which describe an integrated whole system approach to driving improvements in children and young people's mental health outcomes by working in partnership across the NHS, public health, voluntary and community sector, local authority children's services, education and youth justice sectors.

In line with national aims, we want to make sure locally that children and young people have access to the seamless and appropriate services when they need them and where they need them. We will continue to build effective relationships with local schools and colleges as well as other local services in order to spread training and support across the wider workforce to identify and respond to the mental health and emotional wellbeing needs of children and young people across Hampshire and the Isle of Wight.

The Local Plan

This plan will now set out how we will deliver the national vision, respond to what young people need and ensure the services we provide are going to make a difference to the lives of young people. In order to deliver our local plan, we need to ensure we have the right governance in place. We operate at scale across the STP Footprint and Locally within each CCG area. We will highlight where the governance and accountability will be held for the key priorities that we are committed to delivering and for some of our key deliverables working at scale will bring about greater benefits. However, we must ensure locally that we respond to the findings of the joint strategic needs assessment, this is imperative in ensuring our resources are targeted to maximum effect. We will analyse the service we have commissioned so far and what difference they have made. We want to ensure we regularly review the impact and outcomes we are delivering so that we can answer the 'so what' question. Analysing the information based on feedback, needs assessment and current services, will then tell us what the gaps are and what next. We recognise this is a journey that will change over time, needs will differ and what young people need from us must be adaptable and agile enough to provide the right care at the right time in the right place. We understand money isn't always available at the level we need, so we will work with our partners across, health, local authority, third sector and schools to ensure collectively we provide the best possible services for children and young people within all of our resources.



The size and scale of Hampshire & Isle of Wight means we can't capture every single intervention taking place across our geography, but through our networks and joint working with partners we will ensure we maximise our ability to share best practice and learning, identify together areas of weakness or gaps in service and collectively put solutions in place.

Hampshire and Isle of Wight Sustainability Transformation Plan (STP)

Governance

The Hampshire and Isle of Wight Health Sustainability and Transformation Partnership (STP) recognises the importance of good emotional wellbeing and mental health in CYP, not only during childhood and adolescence, but also as predictors for positive mental health outcomes in adulthood.

The national expectations around the Children's agenda continue to grow, and the STP are revising their governance to reflect that ambition. Strategically, CYP leadership are advocating for CYP to ensure a strategic approach that supports growth and additional investment – the strategic focus will be around prevention early intervention, supporting the most vulnerable groups and ensuring we build resilience in childhood to support the lifelong outcomes for our local community.

The STP Children's Governance structure can be seen below:



The Executive Leadership Board will set overarching strategic direction with links to Childrens Trust Board and Health and Wellbeing Boards locally.

The Children's Programme Board will oversee key deliverables against children's priorities set within the NHS Long Term Plan through a combination of interdependencies to other Programme Boards and specific work streams led by the Board reporting into Operational Delivery Group (ODG) and Joint Commissioning Boards/Executive Delivery Group (EDG).

The Adult Mental Health subgroup has now changed to an 'All Age Mental Health' subgroup.

The Children's STP Programme undertakes to:

- Implement New Models of Care, ensuring repatriation of CYP in Tier 4 beds back into locally based provision (thus releasing money into the local CYP mental health care system);
- Strategically review Autistic Spectrum Conditions (ASC)/Attention Deficit Hyperactivity Disorder (ADHD) provision across Hampshire to ensure consistency in pathways and information and support available to parents/carers of CYP undergoing assessment or diagnosed with these conditions;
- Review and implement robust provision for people with Eating Disorders; Achieve 95% CYP eating disorders target by 2020/21 and maintain this, through the clinical network and associated clinical best practice programme
- By 2023/24 it is expected that each acute hospital will have a core 24/7 offer for children and young people to provide appropriate services to patients attending A&E, the STP programme Board will ensure this is met
- Continue to increase CYP mental health access rates and reduce the level of variation across HIOW (current range from 33% to 63% across CCGs)
- NHS 111: To support patients and their parents/carers, we will embed a single multidisciplinary Clinical Assessment Service (CAS) within integrated NHS 111, ambulance dispatch and GP out of hours services from 2019/20, aiming to simplify the process for GPs, ambulance services, community teams and social care to make referrals via a single point of access for an urgent response from community health services

New Care Models Partnership

Hampshire and Isle of Wight are key partners in the New Care Models Partnership which is seeking to implement new models of support to vulnerable young people experiencing mental health crisis and severe mental illness, ensuring that wherever possible their needs can be met as locally as possible. This will include the development of a new intensive home treatment service in 2020/21 which will operate across HIOW and Dorset, interfacing with local services.

Delivery of inpatient bed target: Based on national programme, we will bring number of inpatient beds available for patients with learning disabilities down from 12-15 to 7 by 2023/24. This will be led by the new models of care programme board.



Learning Disabilities & Autism

In Partnership, we will re-design the diagnostic and treatment pathways to support children and young people with autism or other neurodevelopmental disorders including attention deficit hyperactivity disorder (ADHD) and their families, throughout the diagnostic process. We will aim to have a 0-25 service delivery model by 2021

Feeding in to quality improvements on LD and autism there will be a range of Programme outputs from Children's, Mental Health, Transforming Care Partnership strands of work, collaborating with local systems and existing organisational structures to deliver the anticipated impacts of the Long Term Plan

We will continue to develop our process to ensure that Care, Education & Treatment Reviews (CETRs) for children and young people are appropriately available in a timely way.

Across the Transforming Care Partnership Board, the dynamic support risk register will continue to be developed so that timely support is provided to support delivery of the above inpatient admission reduction

To support the provision of physical health checks for patients in the 14-17-year age bracket, we will develop a HIOW-wide process to improve access and take up.

Working at scale will bring about key benefits, however our local needs must be driven through based on the information local people have told us, the next section highlights the themes that have emerged in the production of local strategic documents.

Local Strategic Context

A summary of key strategic documents and how the Local Transformation Plan (LTP) links to these priorities, can be viewed below.

Strategy	Priority/outcome
Hampshire and Isle of Wight Joint Strategic Needs Assessment, 2019	<ul style="list-style-type: none"> • Increase support for children with learning disabilities and autism and improve access to children and young people's mental health services • Increase funding for children and young people's mental health; • Providing the right care for children with a learning disability; • Bringing down waiting times for autism assessments; • Increasing access to support for children and young people with an autism diagnosis, • Improve access to Child and Adolescent Mental Health Services (CAMHS) • Access support via NHS funded mental health services and school or college-based Mental Health Support Teams; • Commitment to developing new models of care - create a comprehensive offer for children and young people, from birth to age 25, with a view to tackling problems with transitions of care; • Emergency attendances – being managed effectively in primary care or community settings to reduce attendances.

<p>Hampshire Health and Wellbeing Strategy, 2019-2024</p>	<ul style="list-style-type: none"> • Improve mental health and emotional resilience for children and young people. This will prioritise prevention and earlier intervention to improve mental health and reduce pressure on CAMHS; • There will be a particular focus on vulnerable groups, including ACEs, the mental health of parents including perinatal mental health, and emotional resilience in educational settings; • Improve physical health in children and young people through prevention and early intervention. This will prioritise healthy weights, physical activity and reducing smoking in pregnancy; • Work more collaboratively across organisations and disciplines to improve outcomes and services, including integrated or aligned approaches where appropriate.
<p>Emotional Wellbeing and Mental Health Strategy for Children and young people in Hampshire, 2019 - 2022</p>	<ul style="list-style-type: none"> • Children and young people’s emotional wellbeing and mental health is everybody’s business • Support for good mental health of parents • Whole school /educational settings approach to mental health • Supporting mental health of vulnerable children and young people • Reducing rates of self-harm • Improvement of service provision. • Improving access and waiting times for Child and Adolescent Mental Health Services
<p>Hampshire’s Children and Young People’s Plan 2019- 2021</p>	<p>Be Healthy</p> <ul style="list-style-type: none"> • Employ strategies with all agencies to promote emotional wellbeing and good mental health; • Promote healthy weights and physical activity; • Promote health and wellbeing in pregnancy and childhood; • Promote equality of access to health services for vulnerable groups of children and young people; • Continue to work to reduce the rate of teenage conceptions among girls aged 15-17; • Reduce and tackle substance misuse in parents and children. <p>Be Safe</p> <ul style="list-style-type: none"> • Improve awareness of, and responsiveness to the exploitation of children • Reduce the number of reoccurrences of children going missing from home or care; • Educate children and young people to manage risks and understand unhealthy and risky behaviour; • Improve support to adults to mitigate the impact of domestic abuse on CYP, ensuring that young people are supported; • Reduce offending and reoffending by young people; • Continue to develop responses and approaches to the trigger trio in children and families.



Enjoy and Achieve

- Continue to improve educational outcomes for disadvantaged children, especially those in care, those eligible for free school meals, those with special educational needs and those with minority ethnic and traveller group heritages that do not achieve as well as children in other groups;
- Promote the opportunity for CYP to participate in their local community;
- Promote school attendance to all cohorts of CYP, and improve school attendance for the vulnerable cohorts, and reduce exclusions;
- Building resilience in schools;
- Promoting resilience and support to parents and professionals;
- Ensure opportunities for children and young people are available to all.

Making a Positive Contribution

- The voice of the child / young person is heard and influences services;
- Promote Rights Respecting Education (United Nations Convention on the Rights of the Child) as a whole -school approach to interpret the Convention in a meaningful way for CYP and thus enable them to become responsible citizens, understand and promote their own rights and their responsibilities, and respect the rights of others;
- Promote school participation in the selection of Hampshire members of the UK Youth Parliament, and the promotion of Members of Youth Parliaments (MYPs) priorities and campaigns;

Economic Wellbeing

- Support programmes to deliver change to identified children and their families with multiple problems including parent/carers not in work and children not attending school;
- To support young people to develop the skills that will support their future careers by participating in education, employment and training;
- To provide young people with access to high quality Careers Education Information, Advice and Guidance (CEIAG) and inspirational experiences that will allow them to make informed decisions for their future careers;
- To ensure that the Hampshire employment and skills system is effective and responsive to the needs of employers and individuals;
- Improve housing options for vulnerable young people and ensure young people are prepared for independent living.

<p>Hampshire: A safe place to learn, a safe place to grow. LGBT+ guidance for schools and colleges, June 2018</p>	<ul style="list-style-type: none"> • Provide practical information in regard to supporting the emotional health and wellbeing of all members of the school community, including Lesbian, Gay, Bisexual, Transgender (LGBT+) pupils and staff; • Ensure that teachers and governors receive high-quality advice, support and professional development in all matters relating to LGBT+; • Build on the good practice that already exists in Hampshire schools, particularly in developing a rights respecting ethos and the promotion of British values (the values we ascribe to as a liberal democracy) through Spiritual, Moral, Social and Cultural (SMSC) education; • Support schools in developing a culture and environment that celebrates diversity and values each and every member of the school community; • Support schools in developing a curriculum that will give all pupils a voice, challenge stereotypes and create and sustain effective policies, such as anti-bullying Purpose of this document Hampshire: a safe place to learn, a safe place to grow 3 • Enable schools to develop an inclusive and diverse ethos in respect to the Equality Act 2010
<p>Isle of Wight Health and Wellbeing Strategy 2018 - 2021</p>	<ul style="list-style-type: none"> • Children are supported to get the best start in life that will lead to good health and wellbeing. This will provide the foundation to ensure they are able to achieve the best opportunities and wellbeing outcomes throughout their lives.
<p>Isle of Wight Children and Young People's Plan, 2017 – 2020</p>	<ul style="list-style-type: none"> • Help children to live in safe and supportive families; • Ensure that the most vulnerable are protected; • Improve achievement and achievement gaps for vulnerable children; • Increase numbers participating and engaging; • Improve outcomes for children with special educational needs and/or disability; • Support children to have the best start in life and be ready for learning; • Support schools and settings to improve attendance and develop positive behaviour; • Encourage physical activity and healthy eating; • Promote sexual health; • Minimise the misuse of drugs, alcohol and tobacco; • Provide play, leisure, culture and sporting opportunities; • Improve mental health and wellbeing; • Reduce crime and anti-social behaviour; • Increase participation, voice and influence.



<p>Isle of Wight Early Help Strategy, 2018-2021</p>	<ul style="list-style-type: none"> • Developing positive relationships with families is at the heart of what we do; • Strengths-based approaches, which develop and build resilience in children, families, communities and our workforce will mean that we get the best from each other and deliver improvement in outcomes; • Safeguarding is everybody's business - for services to be effective each professional and organisation need to play their full part in: identifying; responding to and managing risk safely; • In order to achieve the best outcomes, we need to ensure we listen to and respect the views and wishes of children and families and we are child and family – focused; • Integrated, multi-disciplinary services, which draw upon evidence - based approaches are more effective and efficient in delivering positive and sustained outcomes for families.
<p>Isle of Wight Council Corporate Plan, 2017-2020</p>	<ul style="list-style-type: none"> • Consider and implement arrangements for the long - term strategic management of Children's Services; • Work with and challenge schools' performance to ensure that all are good or outstanding. • Work with and challenge schools in financial deficit to secure a more sustainable position for the schools and the council. • Consider the options, including the benefits and risks in altering the current arrangements for school term times, following a wide-ranging consultation exercise with all stakeholders; any identified changes to be implemented no earlier than the 2019/20 academic year; • Support schools and the education system in adapting to changes in the National Funding Formula; • Maintain focus on children's safeguarding practice to ensure a high quality of service with effective systems to protect children and keep them safe; • Work with partners and key stakeholders to deliver an annual youth conference to increase the council's connections to young people and promote local wellbeing opportunities.
<p>Hampshire and Isle of Wight STP Priorities</p>	<ul style="list-style-type: none"> • Help children to live in safe and supportive families; • Ensure that the most vulnerable are protected; • Improve achievement and achievement gaps for vulnerable children; • Increase numbers participating and engaging; • Improve outcomes for children with special educational needs and/or disability; • Support children to have the best start in life and be ready for learning; • Support schools and settings to improve attendance and develop positive behaviour; • Encourage physical activity and healthy eating; • Promote sexual health; • Minimise the misuse of drugs, alcohol and tobacco; • Provide play, leisure, culture and sporting opportunities; • Improve mental health and wellbeing; • Reduce crime and anti-social behaviour; • Increase participation, voice and influence.





The Needs of Our Local Population

This section reviews what we know about the needs of children and young people across Hampshire and Isle of Wight in order to commission fit for purpose services.

National Context

The Mental Health of Children and Young People survey was carried out in 2017; this was the first update since 2004. This survey for the first time provides findings on the prevalence of mental disorder in 2 to 4 year olds, and spans the transition into adulthood by covering 17 to 19 year olds.

The key findings from the survey are as follows:

- Slight increase over time in the prevalence of mental disorder in 5 to 15 year olds - rising from 9.7% in 1999 and 10.1% in 2004, to 11.2% in 2017;
- One in eight (12.8%) 5 to 19 year olds had at least one mental disorder when assessed in 2017;
- One in twenty (5.0%) 5 to 19 year olds met the criteria for two or more individual mental disorders at the time of the interview;
- Young people aged 17 to 19 were three times more likely to have a disorder (16.9%) than preschool children aged 2 to 4 (5.5%);
- Girls aged 17 to 19 years old were over twice more likely to have a mental disorder than boys at this age (23.9% and 10.3% respectively);
- One in four (24.1%) children with a disorder had no contact with either professional services or informal support in relation to worries about their mental health.

Half of all mental health conditions first occur by the age of 14, and three quarters by the time someone is 24. Poor mental health in childhood is associated with a number of negative outcomes in later life, including poorer educational attainment and employment prospects, and is strongly associated with behaviours that pose a risk to health such as: smoking; drug and alcohol abuse and risky sexual behaviour. Children from deprived backgrounds are significantly more likely to experience mental health difficulties than those from more affluent backgrounds.



- Nationally 1 in 10 children aged 5-16 have a diagnosable condition;
- ½ of all mental health conditions are established by age 14;
- ¾ of all MH conditions are established by the age of 24;
- Whilst only a small proportion of children and young people, up to 10%, will develop mental health disorders, there is a robust evidence base which shows that there is a higher prevalence of mental health problems among vulnerable groups and particularly those whose home environment or family life is chaotic.

Mental Health Prevalence across Hampshire and the Isle of Wight

The national mental health prevalence by gender within the 2017 national survey has been extrapolated using the Hampshire and Isle of Wight registered population. Based on this 34,475 children and young people will have a mental health disorder. The table shows the number by age range.

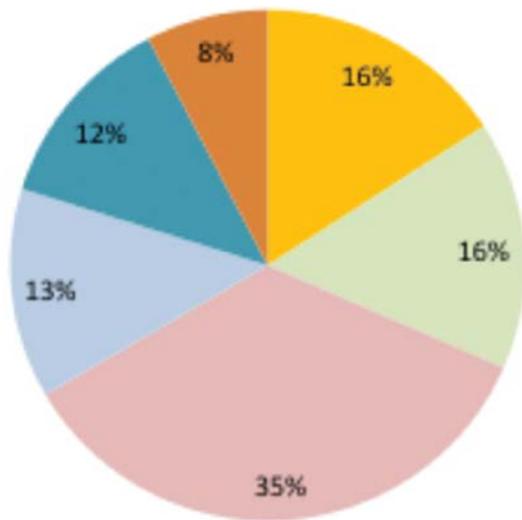
Age Range	% with MH Diagnosis	Hampshire	Isle of Wight
2-4 years	5.5%	2,529	177
5-10 years	9.5%	9,833	838
11-16 years	14.4%	13,769	1,278
17 – 19 years	17.1%	7,486	597
Total	11.7%	33,617	2,858

Population

There are 345,212 children and young people registered with a GP Practice across Hampshire and the Isle of Wight – 0-19 years. As at October 2019.

CCG	Female	Male	Total
North East Hampshire and Fareham	27,074	26,173	53,247
North Hampshire	26,859	25,201	52,060
West Hampshire	59,795	62,526	122,321
South East Hampshire	22,701	23,825	46,526
Fareham and Gosport	21,338	22,510	43,848
Isle of Wight	13,111	14,099	27,210





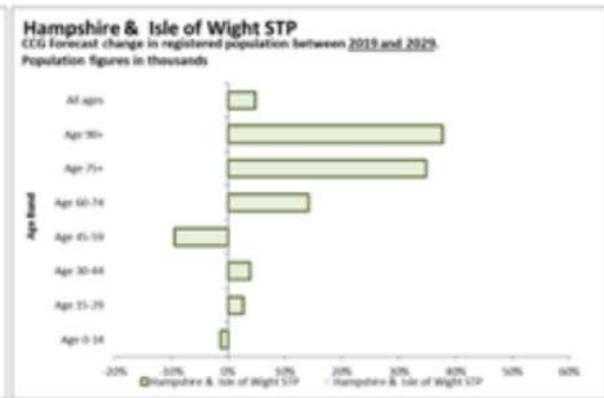
- North East Hampshire and Fareham
- North Hampshire
- West Hampshire
- South East Hampshire
- Fareham and Gosport
- Isle of Wight

Population Forecasts

Population change over the next five years

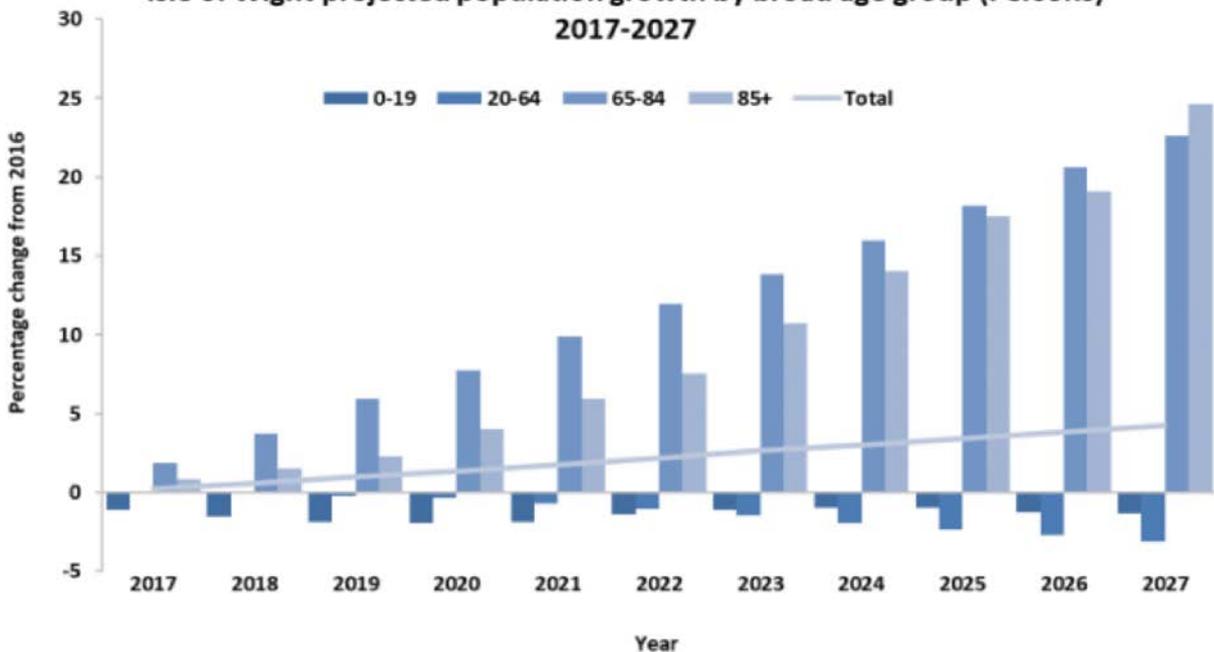


Population change over the next decade



Source: ONS 2016-based subnational population projections for NHS regions and clinical commissioning groups in England

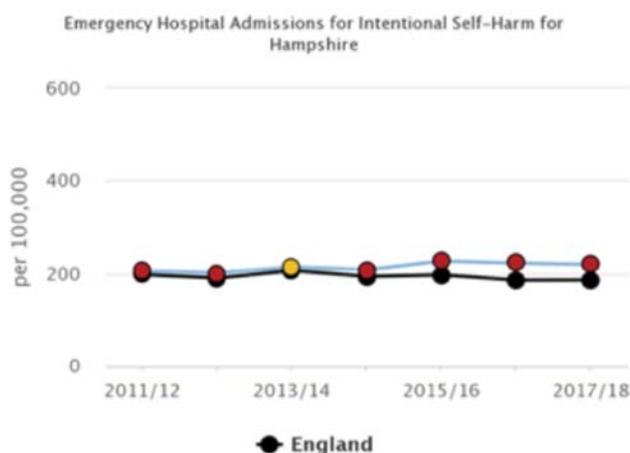
Isle of Wight projected population growth by broad age group (Persons) 2017-2027



Population Needs

Summary of Needs

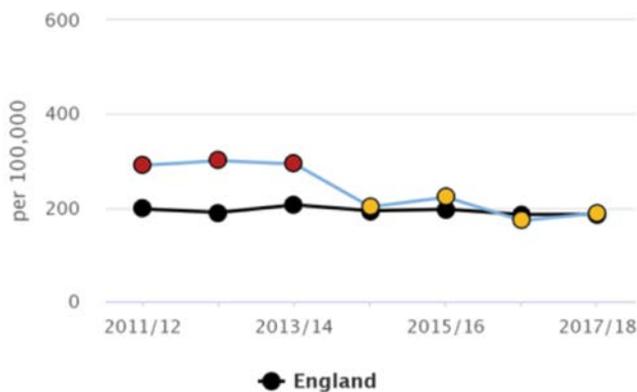
Estimated prevalence of mental health disorders in children and young people % population aged 5-16	Hampshire	Isle of Wight	10 closest CIPFA nearest neighbours	SE England	England	Year	Comments
% of school pupils with social emotional and mental health needs (school age)	8.4%	9.6%	9.6%	8.5%	9.2%	2015	
Percentage of 15 year olds reporting positive life satisfaction	2.9	2.8%	3.0%	2.4%	2.4%	2018	Source: Fingertips tool
Self - Harm Admissions 10-24 year olds per 100,00	69.2	60.3	62.4%	63.3%	63.8%	14/15	Source: Fingertips tool
First time entrants to the youth justice system aged 10-17 year olds per 100,00	591.8	453.3	530.8	467.6	419.5	17/18	
Looked After Children rate per 10,0000	220	379	291	169	239	2018	
Children in Need per 10,000	56	90	82.3	51	64	17/18	LAIT tool – comparators are children's statistical neighbours
Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)	319.4	482	475.9	245.1	341	Apr 18	
Care Leavers	48.3	46.2	47.2	47.5	47.6	14/15	Source: Fingertips tool
	485	81					



Period	Hampshire				South East region	England
	Count	Value	Lower CI	Upper CI		
2011/12	2,675	205.2	197.4	213.1	185.0	197.2
2012/13	2,627	200.6	192.9	208.4	182.2	189.6
2013/14	2,797	213.4	205.5	221.5	204.8	205.9
2014/15	2,736	207.6	199.9	215.6	192.3	193.2
2015/16	2,987	226.2	218.2	234.5	211.8	196.5
2016/17	2,906	221.9	213.9	230.2	197.2	185.3
2017/18	2,847	218.7	210.7	226.9	195.0	185.5

Source: Hospital Episode Statistics (HES), NHS Digital, for the respective financial year, England. Hospital Episode Statistics (HES) Copyright © 2019, Re-used with the permission of NHS Digital. All rights reserved. Local Authority estimates of resident population, Office for National Statistics (ONS) Unrounded mid-year population estimates produced by ONS and supplied to Public Health England and Local Authority estimates of resident population, Office for National Statistics (ONS) Unrounded mid-year population estimates produced by ONS and supplied to the Public Health England. Analysis uses the single year of age grouped into quinary age bands, by sex.

Emergency Hospital Admissions for Intentional Self-Harm for Isle of Wight



Period	Isle of Wight				South East region	England
	Count	Value	Lower CI	Upper CI		
2011/12	377	290.4	261.4	321.7	185.0	197.2
2012/13	386	300.0	270.4	332.0	182.2	189.6
2013/14	381	293.1	264.0	324.6	204.8	205.9
2014/15	262	201.5	177.4	227.9	192.3	193.2
2015/16	280	222.3	196.5	250.4	211.8	196.5
2016/17	219	172.4	149.9	197.2	197.2	185.3
2017/18	239	188.1	164.6	214.0	195.0	185.5

Source: Hospital Episode Statistics (HES), NHS Digital, for the respective financial year; England, Hospital Episode Statistics (HES) Copyright © 2019, Re-used with the permission of NHS Digital. All rights reserved. Local Authority estimates of resident population, Office for National Statistics (ONS) Unrounded mid-year population estimates produced by ONS and supplied to Public Health England and Local Authority estimates of resident population, Office for National Statistics (ONS) Unrounded mid-year population estimates produced by ONS and supplied to the Public Health England. Analysis uses the single year of age grouped into quinary age bands, by sex.

Key performance data for children in need of help and protection

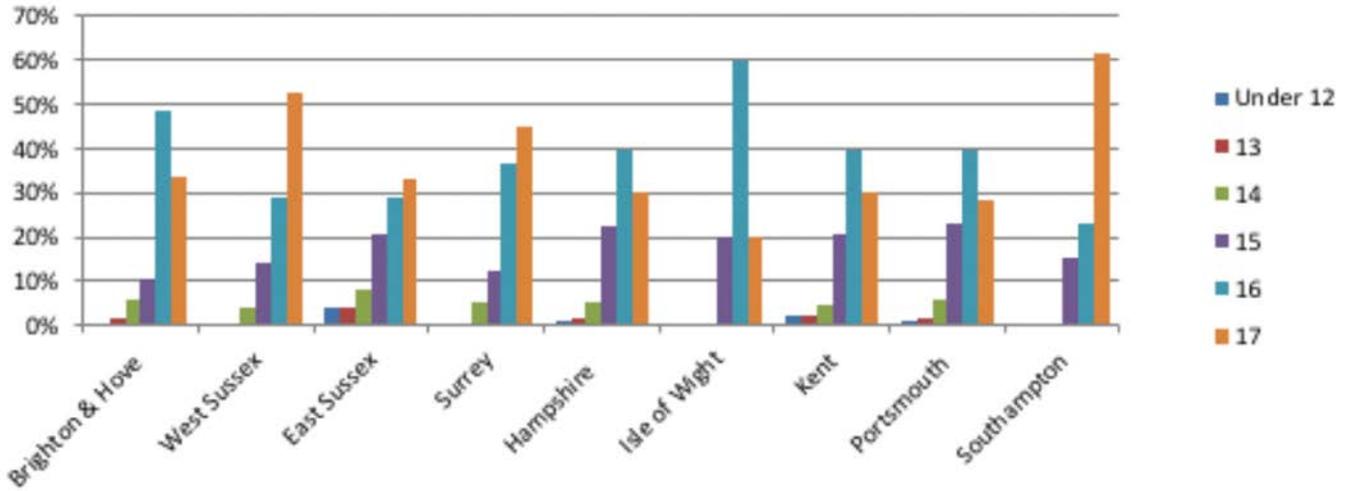
Asylum applications by Unaccompanied Children – National Picture:

Year	Numbers	Year	Numbers
2019	951 (Q1 only)	2017	1,875
2018	2,872	2016	3,290

September to August

	2016-17	2017-18	2018-19	Total
Brighton & Hove	22	14	31	67
West Sussex	98	89	59	246
East Sussex	16	17	30	63
Surrey	137	133	145	415
Hampshire	86	98	44	228
Isle of Wight	4	0	0	4
Kent	233	174	268	675
Portsmouth	51	97	88	236
Southampton	37	41	153	231
				2165

South East Regional Age Profile by Percentage



	Male	Female
Brighton & Hove	87%	13%
West Sussex	85%	15%
East Sussex	85%	15%
Surrey	92%	8%
Hampshire	94%	6%
Isle of Wight	100%	0%
Kent	97%	3%
Portsmouth	99%	1%
Southampton	96%	4%

Health Needs Analysis:

- Following the significant numbers of new arrivals into Kent and other areas of the South East in 2015/16 a health needs analysis was undertaken, the findings reflect the ones detailed above
- Psychological symptoms were reported in 41% of the children, with the most common being Post-Traumatic Stress Disorder, anxiety and depression.
- The implications for the South East Region of continued high numbers of unaccompanied asylum seeking children arriving is clear. Our already overstretched resources will be less able to provide health care in a timely way. Our CAMHS services, who already struggle to meet the need of our citizenship population, will be unable to meet the challenging needs of these particular vulnerable individuals.

Full report can be found at www.uaschealth.org



Children in Care:

	Hampshire	Isle of Wight	10 closest CIPFA nearest neighbours	SE England	England	Year	Comments
Looked After Children rate per 10,000	56	90	82.3	51	64	17/18	LAIT tool – comparators are children's statistical neighbours
Children in Need per 10,000	319.4	482	475.9	245.1	341	Apr 18	
Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)	48.3	46.2	47.2	47.5	47.6	14/15	Source: Fingertips tool
Care Leavers	485	81					

Adopted Children

Hampshire:

- Currently there are 264 children open to the Hampshire County Council adoption support team. If a child is open to the team, emotional support is routinely offered as part of the care plan.
- According to the school census in April 2019 there are 726 adopted children in Hampshire Schools.
- Approximately two thirds of these children will have been provided emotional support by Emotional Literacy Support Assistants (ELSA) or another source.

Isle of Wight:

Information to follow.



Health Needs Analysis:

- Research indicates that looked after children are five to six times more likely to develop mental health problems than their peers. In 2015/16 36% of LAC in Hampshire indicates there was a concern with their emotional and or mental health compared to 12% in the general population.
- The Mental Health and Wellbeing Index encompasses data providing additional insights alongside conventional deprivation measures showing a detailed picture of local underlying indicators of mental health and wellbeing. Evidence from a recent safeguarding deep dive highlights Gosport and Havant as high reporting areas, particularly with Children in Care; findings suggest a correlation between deprivation and safeguarding.

The 2019 IDACI (Income Deprivation Affecting Children Index)

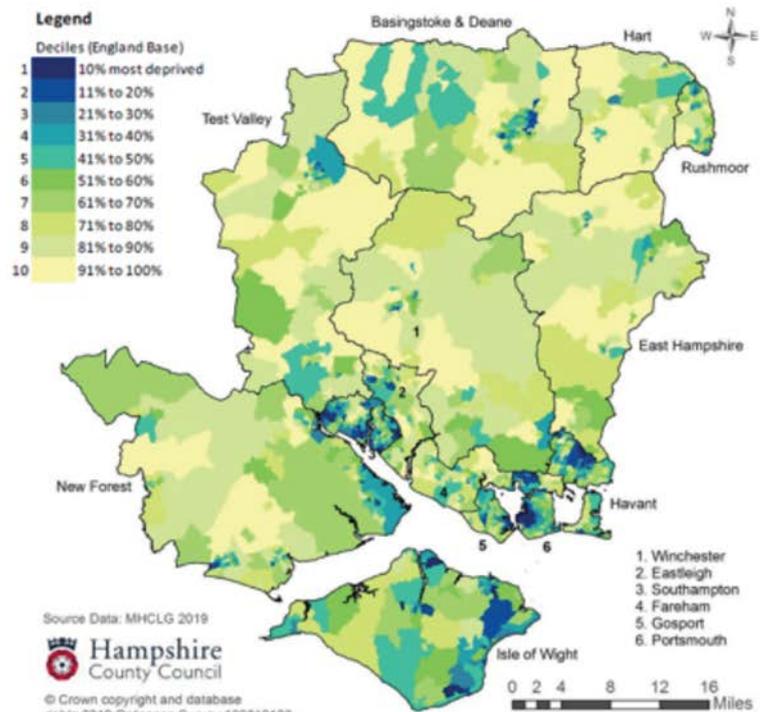


Measures: the proportion of all children aged 0 to 15 living in income deprived families, here defined as families that either receive Income Support or income-based Jobseekers Allowance or income-based Employment and Support Allowance or Pension Credit (Guarantee) or elements of Universal Credit.

The Income Deprivation Affecting Children Index is a supplementary index produced alongside the Income Deprivation Domain. IDACI covers only children aged 0-15 living in income deprived households. The score is expressed as the proportion of all children aged 0-15 living in income deprived families. There are 32,844 areas (lower super output areas) in England. They are ranked with 1 most deprived.

Area (Number of LSOAs in each area are in brackets)	No. of LSOAs in the 10% Most Deprived areas in England (% of LSOA in brackets)	No of LSOAs in the 11%-20% Most Deprived areas in England (% of LSOA in brackets)
Hampshire & Isle of Wight (1,194)	49	76
Hampshire Economic Area (1,105)	43	67
Hampshire County area (832)	8	35
Isle of Wight (89)	6	9
Portsmouth (125)	16	14
Southampton (148)	19	18
Basingstoke and Deane (109)	0	6
East Hampshire (72)	0	0
Eastleigh (77)	0	2
Fareham (73)	0	1
Gosport (53)	1	6
Hart (57)	0	0
Havant (78)	6	11
New Forest (114)	0	6
Rushmoor (58)	1	0
Test Valley (71)	0	2
Winchester (70)	0	1

LSOA are census based population areas of between 1,000 and 3,000 residents.



Health outcomes and life chances for CYP in Hampshire are generally good but there are areas within the county that have their opportunities limited for a range of reasons.

- Early identification of special educational needs and putting the right support in place is key to achieving positive outcomes in health, education and employment
- The number of CYP receiving elective home education is increasing in Hampshire. Reasons given for educated child at home include negative experience of school, academic needs not being met and child experiencing bullying. We need to ensure this population has access to same opportunities to promoting mental health as those in school.
- LGBT: using figure from 2016 it has been estimated that there are 10,000 LGBT young people living in Hampshire. Despite living in a more equal society, research does show that the LGBT community still faces significant health and socio-economic inequalities. LGBT people are at higher risk of suicidal behaviour, mental disorder and substance misuse and dependence than heterosexual people
- In Hampshire, there has been a year on year reduction in first time entrants to youth justice system. However, the reoffending rate has not decreased since 2010, which suggests that this smaller cohort of CYP may be additionally vulnerable and perhaps more challenging to work with. Children who offend often have health, education and social care needs which, if not met at an early age, can lead to a lifetime of declining health and worsening offending behaviour.
- Since 2014 the number of fixed period exclusions in Hampshire has increased. The number of permanent exclusions is low and remains static. Recent research has shown that CYP who have been excluded can develop long term mental health problems and that those excluded can often be living with existing mental health conditions. In Hampshire looked after children are 2.5 times more likely to have one or more periods of fixed exclusion compared to all children.
- Using census data (2011) there are 4,109 Young Carers in Hampshire. This is likely to be an underestimation. Young carers are at increased risk of poor mental health specifically anxiety and depression; are more likely to be bullied; often miss more days off school and subsequent drop out of education, therefore making it more difficult to realise potential both academically and in future employment.
- Tackling any form of child exploitation is a priority for all working with children under 18 years old. Any exploitation of a child can impact on their development, including their health and wellbeing. Exploitation and abuse is associated with increased risk of depression, anxiety, eating disorders, post-traumatic stress disorder, sleep disorders and suicide attempts. It can also lead to difficulties in building positive relationships in adulthood and result in future victimisation.
- The highest levels of deprivation, inequality and need within schools has been identified in Havant and Gosport where there is a high degree of correlation between the Mental Health and Wellbeing Index and measures of deprivation.

- The Mental Health and Wellbeing Index encompasses data providing additional insights alongside conventional deprivation measures showing a detailed picture of local underlying indicators of mental health and wellbeing. Evidence from a recent safeguarding deep dive highlights Gosport and Havant as high reporting areas, particularly with Children in Care; findings suggest a correlation between deprivation and safeguarding.
- Overall, it is estimated that one in eight children and young people have a diagnosable mental disorder which is the equivalent of three or more pupils in every classroom across the Hampshire. Therefore schools and colleges are a vital part of a wider system approach to promoting positive mental wellbeing and preventing mental illness for the age group.
- Demand for specialist CAMHS is increasing. CAMHS in Hampshire saw a 23% increase in the number of referrals from 6,844 in 2015/16 to 8,405 in 2016/17. This volume of activity has remained constant and is replicated in 2017/18 and 2018/19
- In 2016/17, and consistently since then nearly a quarter of CAMHS referrals did not meet the eligibility criteria for the service and needs could have been met in other ways.
- More females than males are referred to Hampshire CAMHS.
- Highest proportion of CYP seen by CAMHS is aged 11-15 and the highest rate (per 1000 population) was from South Eastern CCG area and Fareham & Gosport CCG areas.
- In 2017, due to high demand, counselling services for young people were reporting waiting times of between 3 and 10 months.

Public Health data which illustrates deprivation levels across Hampshire can be found in appendices ? -?

Further national data is also available within the Children and Young People's Mental Health

Fingertips data tool published by Public Health England, enabling comparison over time and benchmarking against comparator areas.

<https://fingertips.phe.org.uk/profile-group/child-health/profile/cypmh>



Engagement with Children and Young People

As well as understanding quantitative we also need to know how children and young people feel about the services we provide and how we can enhance the offer to make sure our services maintain quality and remain responsive and supportive.

In June 2019, Wessex Voices published the 'Hampshire and Isle of Wight Mental Health Service User and Carer Engagement and Experience Literature Review (2016-19)'

The independent review, commissioned by the Wessex Clinical Network and Hampshire and Isle Wight Sustainability and Transformation Partnership (HloW STP), was to identify key themes from existing mental health service user and carer experience and engagement reports across Hampshire and the Isle of Wight from the last 3 years. The main points specifically from Children and Young People were as follows:

- Children and young people highly value meaningful and supportive relationships, including young listener or peer to peer approaches, as well as with mental health professionals. They also highlighted it was important for them to remain autonomous and independent rather than adults taking control.
- Young people report that they are not certain of who to go to for mental health support and fear they will not be taken seriously. They also have concerns around confidentiality.
- Several different children and young people's groups said they were disaffected by school, and an educational setting would not be the best place to find support for poor mental health. For some, it could be a contributing cause. Many, however, want more signposting to come through school.
- Many children and young people outlined that they want an identified person to speak to face to face, rather than a technological solution, and feel that they are too readily passed on to organisations that they have to contact themselves.
- On the Isle of Wight, half of all Special Educational Needs Coordinators (SENCOs) felt they lacked confidence and expertise in dealing with children with Autism and Attention Deficit Hyperactivity Disorder (ADHD).
- Adults continue to have a stronger voice than children and young people. Much of the evidence reviewed was from parents, carers and the services.

In 2019, Southern Health NHS Foundation Partnership and 'Unloc' (which specialises in linking organisations with young audiences) carried out a survey conducted with more than **1,600** school and college students across Hampshire. The survey revealed that almost a third of youngsters identify as someone with a mental health condition. The survey interviewed 10-19 year olds from across **100** different Hampshire schools and colleges.

The results of the survey – which showed that only 1 in 3 young people feel comfortable talking about their mental health with others helped to inform a series of four stand-alone ‘summit’ events held over the spring and summer, each over a full school-day and for up to **50** students from each local area.

Southern Health have shared the survey results with us as well as permission to include in our Local Transformation Plan

- Almost a third of youngsters identify as someone with a mental health condition
- Nearly a quarter (23%) struggle to feel positive most of the time
- Only 1 in 3 young people (35%) feel comfortable talking about their mental health
- 42% would feel embarrassed talking to their teacher about their mental health
- Majority would find talking to other young people with similar problems helpful
- Fewer than 4 in 10 thought their school/college had adequate mental health services. Less than two thirds would know who to contact if they were feeling low
- 57% were unaware of the variety of services available to help them
- Only 19 per cent said they’d felt ‘judged’ for their mental health (a positive sign that stigma within this age group is lower than for previous generations)

CAMHS Engagement events

Over the past few years, Hampshire CAMHS have listened to service users in regards to how increasing information and understanding. The provider has worked hard to secure funding in order to deliver a range of engagement events across Hampshire for service users, parents / carers and professionals.

Event	Numbers of CYP	Outcomes
SAFE Campaign 2016-2017	c. 837	<ul style="list-style-type: none"> • Increased awareness of Suicide awareness • Increased awareness of mental health • 17000 MJH information cards provided across Hampshire • Safe boards giving information to young people (81% of CYP at events found these helpful) • Significant media interest
Everybody Campaign 2018	1797	<ul style="list-style-type: none"> • 91 organisations took part in the big bunting event • 21880 flags for bunting produced • MH and body image awareness stickers produced • Workshops run across the county to discuss body image and eating disorders • Increased awareness of eating disorders



The graphic below depicts some of the self-critical judgement statements that young people shared within the workshops:

I hate everything about myself

Everyone else is smarter, prettier, funnier and more popular than me

I'm too fat to ever be loved

I'm not good enough

I have no friends and no one to play with. I never get invited to parties

I'm useless and stupid

What's wrong with me? Why am I so disgusting?

I wish I was thinner. Thinner people are better people

No one likes me, not even my own family

I'm weird and different from everyone else

I worry all the time about everything

I don't belong on this earth

Nothing I do or say matters

I have no future to look forward to

Event	Numbers of CYP	Outcomes
Fit Fest 2018 - "Get Fit, Get happy, Get healthy"	216	<ul style="list-style-type: none"> Workshops in schools focussing on coping and resilience, Body Image, Martial Arts and Pottery.
PACE (Parent and Carer events) 2018	698	<ul style="list-style-type: none"> Raised awareness of MH issues Increased confidence in managing situations Signposting
School Ambassador Service	50	<ul style="list-style-type: none"> 50 CYP aged 11-12 trained as school MH ambassadors to be a resource for fellow pupils regarding emotional wellbeing
Fit Fest 2019 - "Get Fit, Get happy, Get healthy"	170	<ul style="list-style-type: none"> Workshops in schools focussing on coping and resilience, life skills, Arts and exercise.
Mobile Fit Fest	112	<ul style="list-style-type: none"> Workshops in schools focussing on coping and resilience, life skills, Arts and exercise.
PACE (Parent and Carer events) 2019	235	<ul style="list-style-type: none"> Raised awareness of MH issues Increased confidence in managing situations Signposting

Isle of Wight Autism Improvement – Engagement with families

Event	Numbers of CYP	Outcomes
Autism Service Launch	300 parents and professionals	<ul style="list-style-type: none"> To introduce families to the providers of the new service To offer families the opportunity to receive advice and support from other services such as speech and language, occupational health and family support (Barnardos)
Autism Service Update	70 parents and professionals	<ul style="list-style-type: none"> To update families regarding service progress To offer families the opportunity to receive advice and support from other services such as speech and language, occupational health and family support (Barnardos), Social Care and the Special Educational Needs team
Autism Facebook Page	332 Parents and professionals	<ul style="list-style-type: none"> Social media space for parents to receive service updates and share concerns. The page also brings families together who may be experiencing similar worries about their children.

Pride Youth Games

During August 2019, Commissioners funded a group of young people to attend the 2019 Pride Youth Games in Manchester. The event, designed for 16-25-year-old lesbian, gay, bisexual, transgender, intersex, non-binary, queer and other diversely identifying young people, provides the space to meet and get to know other young people from across the UK, and is a chance to try out different sports and activities in a safe, inclusive and validating environment. The event was attended by 20 young people across Hampshire and Isle of Wight:

“For me, the Pride Youth Games were a completely life changing experience that I couldn’t get from any other event. It improved my self-confidence and gave me experiences and friends I will remember forever.....I didn’t feel pressured or not good enough when doing any of the activities.”

Personally, as a trans male, I found these games the only way that I was able to try out sports as there was no discrimination..... I found a new love for sports at the Pride Youth Games and treasure it as a truly special adventure. It would mean everything for me to be able to go back again next year and reconnect with the community in such an amazing way.

Isle of Wight Youth Trust Schools Charter

The Isle of Wight Youth Trust has launched its Mental Health Charter for Island schools, which it hopes will improve conditions for children and young people in mainstream schools. The charter has been developed with teenagers, as well as health experts, in a bid to ensure a base level of support for the Island’s young people. The Youth Trust will continue to promote the charter with all schools on the island

Isle of Wight Youth Trust Census July 2019.

Partial findings only. Full analysis due December 2019

- The Youth Trust received approximately 5000 responses to its Island Wide Youth Mental Health Census, an increase of 100% compared to the 2017 Census.
- The Census consisted of two age appropriate questionnaires, one for primary schools (under 11) and one for 11-25 yr. olds, with the majority of responses from the 11-16 secondary school age bracket.
- Initial (partial only – 65%) analysis of trends show that:
- 60% of under 11’s, rising to 70% for over 11 year olds, stated that it was either true or sometimes true that they had been worrying a lot.
- For the over 11 year olds, 39% said they mostly cope well with 61% stating that they either do not cope well or sometimes cope well.

- When asked about the top three ways they cope when things are tough, there were some clear differences in strategies between those under 11 and those over. For under 11's the top coping mechanism was pets, followed by video games and family. For the over 11's, music was most popular with 48% choosing this strategy followed by friends and then family and video games sharing joint third.
- The special adult that most young people chose to go to if they had a problem was their Mum, with 80% of under 11's decreasing to 67% of over 11's specifying the importance of this relationship. However, 6% of under 11's and 13% of over 11's specified that they had no one they could go to if they had a problem.
- 58% of over 11 year olds shared that they had been bullied, with verbal bullying being the most common form, the most popular social media form used for bullying was Instagram.
- When young people across the Isle of Wight were asked about self-harm, 29% of over 11 year olds shared that they had deliberately hurt themselves. 39% had thought about taking their life and 11% had made an attempt to take their own life.
- 23% of over 11's had been diagnosed with a mental health condition with 61% specifying Anxiety Disorders as the most common reason.

Havant Safe Haven

"The staff are friendly and it helps me a lot"
- Male, aged 14

"I like how friendly and open Safe Haven is, I feel like I can talk about anything I need to"
-Female, aged 15
"I can be myself and know there are people to help. I like the crafts and group work. I like that I can have a one to one talk if needed" -Female, aged 15"

Barnardos Parenting Programme

"My confidence in my own ability to help my child has increased and I no longer think he needs mental health support/ I will not be pursuing a CAMHS referral at this stage'

"We have learnt so much on how to help us parent our children. It is hard, to have to always think first before responding but we have put in to practice some of the strategies and as a result we are seeing changes already..... still hard at times, our house is calmer and happier and I feel we are becoming a family again.

Psicon Autism Assessment Service

July/August 2019 –

“Excellent service well looked after.”

Parent after developmental history appointment

July/August 2019 –

“Having gone through CAMHS this is an excellent service. Thank you.”

Parent after developmental history appointment

July/August 2019 –

“Really quick appointment times, lovely staff.”

Parent after developmental history appointment

July/August 2019 –

“Having fun.”

CYP when asked best thing about ADOS appointment

Mental Health Support Teams in Schools Project - Pupil engagement:

- Group discussion with 9 pupils aged 11-16 and 2 teachers from Park Community School in Havant
- Group discussion with 10 Pupils from Newtown C of E primary school in Gosport
- SHFT school survey sent to all secondary schools in Hampshire
- Attendance at SHFT school and college engagement events with pupils which attracted over 200 Young people aged between 11 and 17 across 4 events pan Hampshire.

Summary of Needs Analysis

Our needs analysis highlights that children and young people's needs are complex and vary across our geography, with some areas seeing much greater demand and need (South East Hampshire – Havant and Gosport) with increasing prevalence data (Isle of Wight).

By analysing this data and listening to the views of children, young people and their families, we have identified strategic priorities which in partnership with system wide colleagues, we will respond to those needs and target our effort and resources in the right place. The actions we have taken to date and will continue to be taking are detailed within our Local priorities (page 43) and include expected outcomes as these actions are completed and evaluated.

The next chapter reviews our progress against national priorities and highlights areas where we need to improve.

Performance and Service Activity

This section provides an overview of performance in a number of key areas. Performance is linked directly to the National Ambitions set out in the Five Year Forward View to be met by 2020/21 and 2023/24 for children and young people:

National Ambition 1: Access

- At least 35% of CYP with a diagnosable mental health condition will be receiving treatment from an NHS-funded service (FYFV) – 32% for 18/19, 34% in 19/20 (FYFV);
- By 2023/24, nationally 345,000 additional CYP aged 0-25 will have access to support via NHS-funded mental health services and school or college-based Mental Health Support Teams (LTP);

Current Performance

- The Mental Health Service Data Set (MHSDS) published data for June 2019 highlighted that all Hampshire and Isle of Wight CCGs are exceeding this target based on the MHSDS for the first time with all providers (including third sector) now uploading data.

CCG	Actual Number of CYP receiving treatment	Total number of CYP with a diagnosable mental health condition	Target Access rate 19/20	Percentage Access Rate
North East Hampshire and Farnham	1,310	3,750	34%	34.9%
North Hampshire	1,545	4,053	34%	38.1%
West Hampshire	3,195	9,294	34%	34.4%
South East Hampshire	1,370	3,799	34%	36.1%
Fareham and Gosport	1,505	3,495	34%	43.1%
Isle of Wight	1,445	2,387	34%	60.6%

- Commissioners receive regular local reporting from Providers and compare with MHSDS to build our understanding of demand.

Next steps:

- Increase investment and capacity within mental health services including Mental Health Support Teams (MHST) in schools;
- Continue to work with Providers to improve the quality of reporting to the MHSDS;
- To aim to upload SNOMED-CT (a structured clinical vocabulary for use in an electronic health record) outcome codes to the MHSDS.

National Ambition 2: Eating Disorders

- Achieve 2020/21 target of 95% of children and young people with eating disorders accessing treatment within 1 week for urgent cases and 4 weeks for routine cases (FYFV);
- Maintain these standards from 2020/21 (LTP).

Current Performance	
Hampshire	Isle of Wight
Routine: 49.3% Urgent – 50%	Routine: 95% No urgent referrals received to date
<ul style="list-style-type: none"> • Eating Disorder services are integrated into local CAMHS delivered by Sussex Partnership Foundation Trust and additional investment has been made to ensure they are delivering against the National Institute of Health and Care Excellence (NICE) standards; • Hampshire has recently been successful in a bid to pilot the ARFID in Children and Young People Eating Disorder Community Project; • ARFID is defined as a restriction of a person's own eating by consuming smaller amounts of food, or by avoiding certain foods or entire food groups. ARFID differs significantly from bulimia or anorexia in that it is not always accompanied by weight loss. It appears to be more prevalent among younger children (2-12 year olds) as well as those with autism, anxiety, and ADHD. Left untreated, ARFID can lead to malnutrition; • Currently children and young people who present with this illness may be turned away by Community Eating Disorder, neurodevelopmental or standard CYPMH services. This results in a gap in care and difficulty for the child, family and GP services to access appropriate care. <p>Next steps:</p> <ul style="list-style-type: none"> • Support the implementation of the ARFID project to improve access and provide care for CYP presenting with ARFID. Transformation funding will support a pilot in each region to roll out the adjustment, including support for the training of staff, data collection and participation in a national evaluation. In the medium term, we anticipate all CYP Community Eating Disorders Services (CEDS) will provide this care. This will be supported by the additional funding (uplift) in CCG baselines in 2019/20 and over the course of the NHS Long Term Plan to enhance CYP CEDS. • Continue to work with Wessex Clinical Network to scope how the comprehensive package in-line with NICE Standards can be delivered to all e.g. multi-family therapy, Cognitive Behavioural Therapy for Eating Disorders (To continue to engage with key stakeholders to promote service / referral pathways and ensure eating disorder is identified on referral to ensure timely access. 	<ul style="list-style-type: none"> • Eating Disorder services are integrated into local CAMHS delivered by St Marys Foundation Trust and additional investment has been made to ensure they are delivering against the NICE standards. Numbers of children and young people presenting with and eating disorders are very few and therefore performance can be difficult to interpret. <p>Next steps:</p> <ul style="list-style-type: none"> • Continue to work with Wessex Clinical Network to scope how the comprehensive package in-line with NICE Standards can be delivered to all e.g. • To continue to engage with key stakeholders to promote service / referral pathways and ensure eating disorder is identified on referral to ensure timely access.

National Ambition 3: Crisis Care

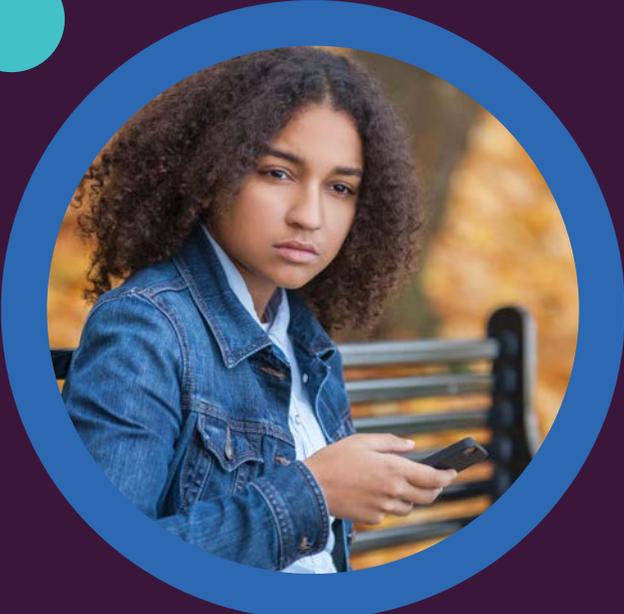
- Ensure there is a CYP crisis response that meets the needs of under 18 year olds (FYFV);
- By 2020/21, areas will provide Crisis Resolution and Home Treatment (CRHT) functions that are resourced to operate in line with recognised best practice, delivering a 24/7 community-based CRHT as an alternative to acute inpatient admission;
- By 2020/21, all acute hospitals will have mental health liaison services that can meet the specific needs of people of all ages by 2020/21;
- By 2023/24, there will be 24/7 mental health crisis provision for children and young people that combines crisis assessment, brief response and intensive home treatment functions (LTP).

Current Performance	
Hampshire	Isle of Wight
<ul style="list-style-type: none"> • Plans in place for delivery in 20/21 of CRHT functions through New Care Models (NCMs) Partnership and joint developments with Children's Social Care; • A joint project across the HIOW STP is underway to look at improving crisis support for children and young people and avoiding A&E admissions. Identified areas for focus are: <ul style="list-style-type: none"> - Data analysis - Policy, process, protocol under developed - Learning from Portsmouth to inform system design - Effective early Intervention is crucial - moving financial investment back to earlier in system - Appropriate admission and wider alternatives for care - Care co-ordination (CAMHS focussed) within Acute settings needs integration between Social Care and CAMHS. - Integrating crisis team – recognising the potential of NCMs - Timely placement i.e. stepping - up - Agreement between private providers and Acute Trusts and CCG Commissioners - Timely and safe discharge; starting planning within first week of admission, ideally first two days - Below 300 Consultant Psychiatrists in a small national pool to draw on, but irrespective of the pool, the arrangement is not reviewed or governed - Develop governance procedure for consultant on-call 	<ul style="list-style-type: none"> • Plans in place for delivery in 20/21 of crisis resolution and home treatment functions through New Care Models Partnership and joint developments with Children's Social Care • A joint project across the HIOW STP is underway to look at improving crisis support for children and young people and avoiding A&E admissions. Identified areas for focus are: <ul style="list-style-type: none"> - Data analysis - Policy, process, protocol under developed - Learning from Portsmouth to inform system design - Effective Early Intervention is crucial - moving financial investment back to earlier in system - Appropriate admission and wider alternatives for care - Care co-ordination (CAMHS focussed) within Acute settings (daily updates on each child) [looking after the 'sick children' – physical] – needs integration between Social Care and CAMHS. - Integrating crisis team – recognising the potential of NCMs - Timely placement i.e. stepping up - Agreement between private providers and Acute Trusts and CCG Commissioners - Timely and safe discharge; starting planning within first week of admission, ideally first two days - Below 300 Consultant Psychiatrists in a small national pool to draw on, but irrespective of the pool, the arrangement is not reviewed or governed - Develop governance procedure for consultant on-call • Safe Haven (No Limits) being piloted from October 2019;

continued overleaf

National Ambition 3: Crisis Care (continued)

Current Performance	
Hampshire	Isle of Wight
<ul style="list-style-type: none"> The i2i crisis service (embedded within Hampshire CAMHS) undertakes all hospital assessments across Hampshire within 24 hours and works in partnership with other Trusts on a place-based model to ensure CYP are seen within expected time-frames. Home treatment service working well with good feedback from CYP and families who benefit from its flexibility. Recruitment and retention continue to be challenging. Innovation in recruitment – appointing social workers into team - broadening skills. Service works with many systems to ensure appropriate discharge for children and young people; Safe Haven (Just Wellbeing) in Aldershot continues to deliver successfully and is monitored by commissioners; Safe Haven (Solent Mind) opened in Havant during mid - 2019, and is being piloted. <p>Next steps:</p> <ul style="list-style-type: none"> Subject to available funding, increase capacity of Safe Havens and identify recurrent funding for pilot sites; Implementation of the new intensive home treatment team as part of the CAMHS New Care Models Partnership and development of the interface with local services. This is due to be delivered from April 2020; Continue to explore funding options for psychiatric liaison in acute settings. 	<p>Next steps:</p> <ul style="list-style-type: none"> IOW CAMHS to upskill all age crisis service to respond to children and young people out of hours. IOW CAMHS to develop out of hour's service Subject to available funding, increase capacity of Safe Havens and identify recurrent funding for pilot sites; Implementation of the new intensive home treatment team as part of the CAMHS NCMs; Partnership and development of the interface with local services. This is due to be delivered from April 2020; Continue to explore funding options for psychiatric liaison in acute settings.



National Ambition 4: Transition / 0-25 offer

- By 2023/24, there will be a comprehensive offer for 0-25 year olds that reaches across mental health services for CYP and adults.

Current Performance	
Hampshire	Isle of Wight
<ul style="list-style-type: none"> • Continue to commission the 'Futures in Mind' project delivered by Hampshire Parent Carer Network which provides intervention, aimed at improving the wellbeing of parent carers of children and young people aged 0-25 years. The objectives of the programmes are to promote resilience and individual strengths, create pathways to community and peer support and focus on the wellbeing of parent carers to improve the outcomes of the CYP under their care; • Working across CYP and adult services we will co-produce service models to create a comprehensive offer for 0-25 year olds that will deliver an integrated approach across health, social care, education and the voluntary sector. Initial scoping of opportunities has started in 2019/20; • Proactively plan for and oversee the transition to 0-25 CYP services, as set out in the 10 - year plan, focussing on identifying the systems vulnerabilities associated with transition and agree minimum standards to provide a consistent framework for LDS and CCG/LA Commissioners. 	<ul style="list-style-type: none"> • Continue to commission the 'Futures in Mind' project delivered by Hampshire Parent Carer Network which provides intervention, aimed at improving the wellbeing of parent carers of children and young people aged 0-25 years. The objectives of the programmes are to promote resilience and individual strengths, create pathways to community and peer support and focus on the wellbeing of parent carers to improve the outcomes of the children and young people under their care; • Working across CYP and adult services we will co-produce service models to create a comprehensive offer for 0-25 year olds that will deliver an integrated approach across health, social care, education and the voluntary sector. Initial scoping of opportunities has started in 2019/20; • Proactively plan for and oversee the transition to 0-25 CYP services, as set out in the 10 - year plan, focussing on identifying the systems vulnerabilities associated with transition and agree minimum standards to provide a consistent framework for LDS and CCG/LA Commissioners; • Continue to progress 0-25 mental health services pathway within the Isle of Wight Mental Health Sustainability Transformation Programme Steering Group.

Summary of 2018/19 data

Hampshire – Current ASC Assessment Service								Isle of Wight - Current					
	Community Counselling	Parenting Support	Frankie Workers	Willow Team	Hampshire Parent Carer Network	Breakout Youth	ASC Assessment Service	Community Counselling	Parenting Support ADHD	Parenting Support ASC	Frankie Workers	Breakout Youth	ASC Assessment Service
Routine referrals into service	875	708	87	342	560	15	2195	839	137	147	78	20	941
Average wait from referral to assessment (weeks)	21 Group 17 Indiv sessions	1.63	3-4	2-3	Maximum of 4 weeks	4	N/A	4	N/A	N/A	3-4	2	N/A
Average wait from assessment to treatment (weeks)	Immediate Treatment following assessments	11.1	5-6	N/A		1	N/A	11	16	18	4-5	1	N/A
Caseload	172 group 439 Indiv sessions	835	56	107		N/A	N/A	821	121	104	17	N/A	N/A
face to face contacts	Not locally reported	2143	1600	Not locally reported	N/A	378	Not locally reported	Not locally reported	67	111	Not locally reported	486	Not locally reported
2 or more contacts in past 12 months	Not locally reported	411	5	Not locally reported	N/A	14	Not locally reported	Not locally reported	67	111	Not locally reported	18	Not locally reported

Out of Hours Crisis and Emergency Provision – Progress to Date

Hampshire and Isle of Wight emergency and crisis CAMHS services are delivered by our CAMHS providers and Safe Havens.

Care and Education Treatment Reviews or Blue Light meetings are carried out ahead of any Tier 4 CAMHS admission for children with learning disabilities and/or autism that are in crisis and there is good joint working between the CCG and the provider organisations in this regard.

Crisis Care Concordat

The Hampshire & Isle of Wight Crisis Care Concordat is committed to improving services for people of all ages in, or at risk, of a mental health crisis. The actions listed on the plan therefore apply to children, adults and older person's mental health services. This includes:

- Developing end to end pathways for people of all ages in crisis which are shared across the multi-agency team
- Improving responsiveness of services to people approaching or undergoing mental health crisis – ensuring people get the right care at the right time through agreed pathways encompassing
- community and acute hospital care.
- Reduction in the use of s136 detention and increased appropriate use of s136
- Improving the experience of young people when subject to s136/135(1).
- Reduction in use of inappropriate urgent care pathways (including reducing hospital admissions and LOS) for people who are known and unknown to mental health services by 20% in 2 years such as 999/111 and Emergency Department by people in Mental Health Crisis

Adolescents in Crisis

A joint project across the HIOW STP is underway to look at improving crisis support for children and young people and avoiding A&E admissions. Identified areas for focus are:

- Data analysis
- Policy, process, protocol under developed
- Learning from Portsmouth to inform system design
- Effective Early Intervention is crucial - moving financial investment back to earlier in system
- Appropriate admission and wider alternatives for care
- Care co-ordination (CAMHS focussed) within Acute settings (daily updates on each child) [looking after the 'sick children' – physical] – needs integration between Social Care and CAMHS, CAMHS leadership is likely
- Integrating crisis team – recognising the potential of NCM
- Timely placement i.e. stepping up
- Agreement between private providers and Acute Trusts and CCG Commissioners



- Timely and safe discharge; starting planning within first week of admission, ideally first two days
- Below 300 Consultant Psychiatrists in a small national pool to draw on, but irrespective of the pool, the arrangement is not reviewed or governed
- Develop governance procedure for consultant on-call

24/7 Crisis Care – Current Provision

An all age 24/7 crisis support service is available on the Isle of Wight. Staff within the Mental Health Crisis Advice (Single Point of Access) service have been trained to respond to the need of children and young people and work in close liaison with Isle of Wight CAMHS.

Hampshire CAMHS provides a comprehensive out of hours' crisis service. The i2i service is an Urgent Assessment and Home Treatment Team and will provide specialist intensive assessment and treatment to young people who are experiencing crisis or who require extra care to try to prevent crisis from happening. This service can only be accessed by young people already known to CAMHS and who have been referred by their CAMHS worker. The team provide urgent assessments and help develop care plans with the young person, their family, the CAMHS team, school and other agencies (where needed) that aim to keep young people as safe as possible.

Early Intervention in Psychosis

Southern Health Foundation Trust provides the early intervention service in Psychosis for children age 14 and over for Hampshire and the Isle of Wight. Younger children are seen by CAMHS.

The service assesses treats and supports young people who are or who maybe in the early stages of a psychotic illness.

Treatment and support are offered in person's home and in local places in the community.

The team will carry out an initial screening followed by an assessment to find out more about any problems people may be experiencing and to establish what the needs are.

The treatment and support received will be tailored to individual needs. Some of the ways people get help include:

- Educating individuals, friends and family about psychosis
- Creating plans to help people through crisis
- Medication
- Working with families or guardians
- One-to-one support
- Supporting children in young people in education or employment
- Assisting children and young people to carry on with everyday



Current Performance across Hampshire and the Isle of Wight (August 2019 – NHS England)

From 1 April 2016, more than 50% of people with first episode of psychosis (FEP) are treated with a NICE-approved package of care within two weeks of referral. The current expectation is that, within a maximum of two weeks of referral, more than 50% of people will have been assessed by the EIP service.

CCG Name	March 2016	March 2017	March 2018	March 199	August 2019
Fareham & Gosport CCG	28.5%	0% (1 referrals received) breached 2 wks	100%	66%	100%
Isle Of Wight CCG	0% (2 referrals received) breached 2 wks	100%	No referrals	25%	75%
North East Hampshire & Farnham CCG	25%	100%	100%	100%	No referrals
North Hampshire CCG	42.8%	No referrals	33.3%	100%	66%
South Eastern Hampshire CCG	28.5%	100%	100%	100%	100%
West Hampshire CCG	20%	75%	100%	42.8%	66%
South East England Commissioning Region	31.9%	54.1%	46.2%	53.3%	48.7%



Mental Health Triage

From 2019, children's mental health nurses have been co-located with South Central Ambulance Service NHS 111/999 in the Call Centre to support HIOW mental health calls. The mental health nurses receive transferred calls from NHS111 when the caller to NHS111/999 is assessed as possibly having a mental health need with no physical health need. This service provides 24/7 – 365 days access to Mental Health nurses across a rotational basis to ensure a consistent, confident and reliable service can be provided.

The model also provides telephone access to timely advice and support for professionals who come into contact with people who may be suffering a mental health problem. This ensures the person the professional is in contact with receives the most appropriate support at the earliest opportunity which may reduce the mental health decline and therefore achieve a better outcome for the person as well as more efficient use of professional time and a reduction in inappropriate dispatches of ambulance's and transfers to accident and emergency depts.

The Mental Health Triage service takes calls from Hampshire Constabulary when officers come into contact with a member of the public presenting with mental health needs that require 'immediate care' and 'control' under the legal framework of S136 of the Mental Health Act. Prior to detaining under this act, Hampshire Constabulary will contact the Mental Health Triage service for advice, guidance and triage of the individual. A dynamic risk assessment will be carried out and as part of a multi-team response a decision will be made on either detaining under S136 or another least restrictive alternative to support the immediate crisis.

The mental health nurses are now managing an average of 1600 calls a month from 'all ages', they support Ambulance with Cat 3 and 4 revalidations, ambulance crews on scene and Hampshire Police with mental health advice, especially confirmation of S136. In July 2019, compared to baseline there has been (all ages):

- 83.3% reduction in ED endpoints
- 78.6% Reduction in 999 Endpoints
- 74.8% Reduction in Primary Care endpoints
- 66.6% are supported with Home Management / Self Care / No further action compared to 11.3% in Dec-18 before 111 triage
- 'Attend ED immediately for a Crisis Mental Health Assessment' activity and the conversion to Home Management/Self Care 71.8% vs attend ED 1.8%
- At present data is not available to identify under 18 activity but there are plans in place to report this in future.



New Care Models (NCM)

Hampshire and Isle of Wight CCGs are part of the CAMHS New Care Models partnership.

The main focus during 2017/18 was to implement a single point of access and management system for bed usage in order to release clinical capacity to support young people in their homes. This project was delivered successfully.

During 2018/19 – 2019/20, the partnership has been developing a business case for an intensive home treatment team to further reduce the need for Tier 4 admission or extensive length of stay – anticipated to go live from April 2020/21.

Hampshire Inpatient information						
Primary service type	Section	2016 - 2017	2017 - 2018	2018 - 2019	2019 - 2020*	Totals
CAMHS Acute	2	9	20	14	10	53
	3	2	10	12	3	27
	136	1				1
	Informal	63	60	59	15	197
	Unknown	7				7
CAMHS LD	2				1	1
	3		1	1		2
	Informal			2		2
CAMHS Low Secure	2			1		1
	3		2	2	1	5
	Informal			1		1
	Unknown	1				1
CAMHS Medium Secure	2			1		1
	3	1	2			3
	37			1		1
	38		1	1		2
	48/19		1	1		2
CAMHS PICU	2	1	7	11	2	21
	3		4	3	2	9
	Informal	6	1			7
Eating Disorders	2	4	2	7	4	17
	3	1	3	3		7
	Informal	18	21	15	17	71
	Not Known	1				1
High Dependency	3			2		2
	Informal			1		1
Not Known CAMHS	2		2	1		3
	3				1	1
Totals		115	137	139	56	447

* To July 2019



Activity Breakdowns

Hampshire CAMHS – Contract Value: 13.3m

Hampshire CAMHS Referrals	Referral	Urgent referrals	Urgent referrals meeting criteria	Emergency referrals in hours	Emergency referrals OOH	Open Caseload	Cases closed	Signposted referrals
April 2016 - March 2017	8405	531	160	592	77	6275	7242	2213
April 2017 - March 2018	7883	607	169	580	80	7173	6757	2334
April 2018 - March 2019	8121	483	96	621	71	7015	7978	3373

Hampshire CAMHS Assessment / Treatment	First Assessment	First Treatment	Follow up appointments (Total)	Offered Contacts
April 2016 - March 2017	3871	2863	70872	81088
April 2017 - March 2018	3786	2535	66181	75938
April 2018 - March 2019	2987	2166	64943	75689

Hampshire CAMHS Eating Disorder service	Referrals	Referrals signposted	Initial contact	Follow up contact
April 2016 - March 2017	116	2	-	-
April 2017 - March 2018	174	0	448	4772
April 2018 - March 2019	214	1	569	6212

Key Headlines for Hampshire CAMHS:

- Hampshire CAMHS are currently experiencing demands for the service above the contracted activity rate with the number of referrals at the highest number since 2017;
- Number of urgent referrals has reduced to lowest amount for three years with a significant drop in those meeting the criteria for urgent.
- There is an increasing trend for emergency referrals across Hampshire
- Signposting to more appropriate services has increased over the contract period.
- In the current contractual year, the average wait to assessment across Hampshire is 16 weeks with the average wait to assessment at 40 weeks. This is above the contractual requirement however work is being undertaken between the provider and commissioners to explore how to reduce the waiting time.
- The open caseload peaked in 2017 - 2018 but has reduced since with an overall figure that is 40 CYP above the number from 2016 - 2017
- CAMHS are providing a number of groups within schools with an annual focus. These are well attended.
- Hampshire CAMHS have recently been nominated for 3 HSJ awards.
- Over the past 12 months ASC assessments have been taken out of the core contract and awarded to another provider with the intention of reducing waiting times for ASC assessments;



Isle of Wight CAMHS

IOW CAMHS	Referral	Referrals Accepted	Caseload	Average Waiting Time from Referral to Assessment (weeks)	Average Waiting Time from assessment to treatment (weeks)	Total number of face to face contacts	Number with 2 or more contacts in past 12 months
April 2016 - March 2017	709	709	479	4.4	0.15	5942	481
April 2017 - March 2018	743	739	463	5.3	2.9	5114	594
April 2018 - March 2019	805	804	443	2.6	3.8	4874	645

Key Headlines for IOW CAMHS:

- Number of referrals increasing year on year;
- The number of rejected referrals is not currently recorded correctly – work is underway to correct this;
- Average waiting time from referral to first appointment has reduced year on year. The IOW is 2.6 week. NHS Benchmarking for 18/19 highlights a national mean of 9 weeks
- Average waiting from 1st appointment to 2nd appointment is 3.8 weeks (which nationally it is 6 weeks according to the NHS benchmarking);
- Caseload at the end of each year has reduced year on year (by around 30 from the first year to the last year);
- Three clinicians trained over the past two years in CYP Improving Access to Psychological Therapy (IAPT) has contributed to reduction in caseload due to shorter (where clinically appropriate) interventions;
- The number of groups run by CAMHS has increased, resulting in a more timely treatment pathway for children and young people;
- ASC diagnostic pathway improvements has allowed the service to signpost appropriately and prevented escalation and the need for CAMHS intervention;
- Due to workforce challenges, the number of contacts have decreased year on year
- Number of CYP with 2 or more contacts in the past 12 months has increased year on year.



Hampshire & Isle of Wight Youth Offending Team (YOT) 2018/2019

Hampshire:

- 22 children and young people secured in Youth Offending Institutions:
- 10 were offered emotional health support
- 9 accessed emotional health support
- 3 did not access support

Isle of Wight:

- The numbers for 2018-2019 are low and therefore individuals are at risk of being indentified. Out of the young people secured in Youth Offending Institutions, all were offered emotional health support but did not access it due to no identifiable mental health issues.

ASC Assessment Services

Isle of Wight – Contract Value £500k

ASC Assessment Service	Referrals	Assessments Completed**	Reports Sent Out	Diagnosis Rate	Did Not Attend (DNA) Rate
August 2018 to September 2019	941	337	290-	95%	5.68%-

Hampshire – Contract Value £989k

ASC Assessment Service	Referrals	Assessments Completed**	Reports Sent Out	Diagnosis Rate	DNA Rate
September 2018 to September 2019	2195	809	790	92.8	1.03%

Hampshire Parent Carer Network

The Futures in Mind' project delivered by Hampshire Parent Carer Network provides intervention, aimed at improving the wellbeing of parent carers of children and young people aged 0-25 years. The objectives of the programmes are to promote resilience and individual strengths, create pathways to community and peer support and focus on the wellbeing of parent carers to improve the outcomes of the children and young people under their care.

Over the year, 560 parents have attended group intervention.

"You have saved my life. I felt so alone. Now I know that it's not just me and I can see an end to it. I cannot thank you enough."

Parent of a 15 year old struggling with significant anxiety and low mood



The right care at the right time, in the right place for local people

Transformation plan

Investment and Progress so far

Hampshire

Service	Contract Value	Status
Recurrent		
Child and Adolescent Mental Health Service (CAMHS)	£13.3m	Contract Expires March 2021 – service review underway
Eating Disorder service (Hampshire CAMHS)	£1.6m	Future in Mind (FIM) funded
Barnardo's – Parenting programme	£400k	Expires March 2021
Counselling Services	£795k	Expires March 2020. Procurement process underway
Primary School Mental Health Support	£130k	Expires March 2020. Ongoing funding being explored
Frankie Workers (Sexually abused children)	£100k	FIM funded
Willow Team (Sexually exploited/ Trafficked)	£86k	Expires March 2020. Ongoing funding being explored
Break out Youth (LGBTQ+ group counselling)	£20k	Expires March 2020. Ongoing funding being explored
Hampshire Parent Carer Network Peer support training	£25k	Expires March 2020. Ongoing funding being explored
Transformation		
Child and Adolescent Mental Health Service (CAMHS)	£13.3m	Contract Expires March 2021 – service review underway
Havant Safe haven (Pilot)	£60k	Expires March 2020. Ongoing funding being explored
Think Ninja Self Help App	£110k	Expires March 2020. Ongoing funding being explored
Autism Spectrum Condition Assessment Service	£989k	Expires January 2020, service under review
Primary Behaviour Service – Primary Mental Health Support	£60k	Expires March 2020
Hampshire Parent Carer Network – Parent Support	£20k	Expires March 2020

The above funding does not include recently awarded funding streams for ARFID (£100k) and MHST (£720k)

Isle of Wight

Service	Contract Value	Status
Recurrent		
Child and Adolescent Mental Health Service (CAMHS)	£3.1m	Service review underway
Eating Disorder service (IOW CAMHS)	£105k	FIM funded
CAMHS Out Hours	£159k	FIM funded
Barnardo's Parenting	£52k	Expires March 2020. Ongoing funding being explored
Counselling Services	£250k	Expires March 2020. Procurement process underway
Autism Spectrum Condition Assessment Service	£467k	Procurement process underway
ADHD service	£110k	Service review underway
Frankie Workers (Sexually abused children)	£17.5k	Expires March 2020. Ongoing funding being explored
YOT	£47.5k	Recurrent Funding
Transformation		
Safe Haven	£30k	Expires March 2020. Ongoing funding being explored
Primary Behaviour Service – Primary Mental Health Support	£10k	Pilot completed. Ongoing funding being explored

Reviewing the performance of our services is a regular occurrence, we work in partnership with our providers to understand demand and capacity challenges and what additional resources are required to meet needs. We recognise that demand is growing and the needs of children and young people are becoming more complex. We must ensure our resources are targeted in earlier intervention and prevention services, to avoid children and young people going in to crisis and requiring costly interventions.

Future investment will be prioritised to meet the Long Term Plan ambitions

We have identified the following priority areas for investment:

- Continued development of CAMHS improvement to reduce waiting times. A stakeholder workshop has also taken place to inform a plan to improve waiting times.
- Autism assessment services for children and young people; in 19/20 we secured £1m extra investment and an additional £0.5 for the remainder of 19/20 has been confirmed.
- All age neurodevelopment services for children and young people; this is work under development to identify funding required
- Acute psychiatric liaison; some areas have already started to pilot models and funding will be considered during the financial planning rounds
- Eating Disorders; extra investment to support meeting the targets
- Safe Havens/Crisis Support; early intervention is a vital part of our strategy
- Parent / Carer Network capacity;
- Collaboration around the development of transition arrangements and 0-25 pathways;
- Explore the 0-5 mental health and emotional wellbeing offer including growing Mental Health Support Teams (MHSTs) capacity;
- Expanding support services to CYP in further education (colleges)
- Digital solutions



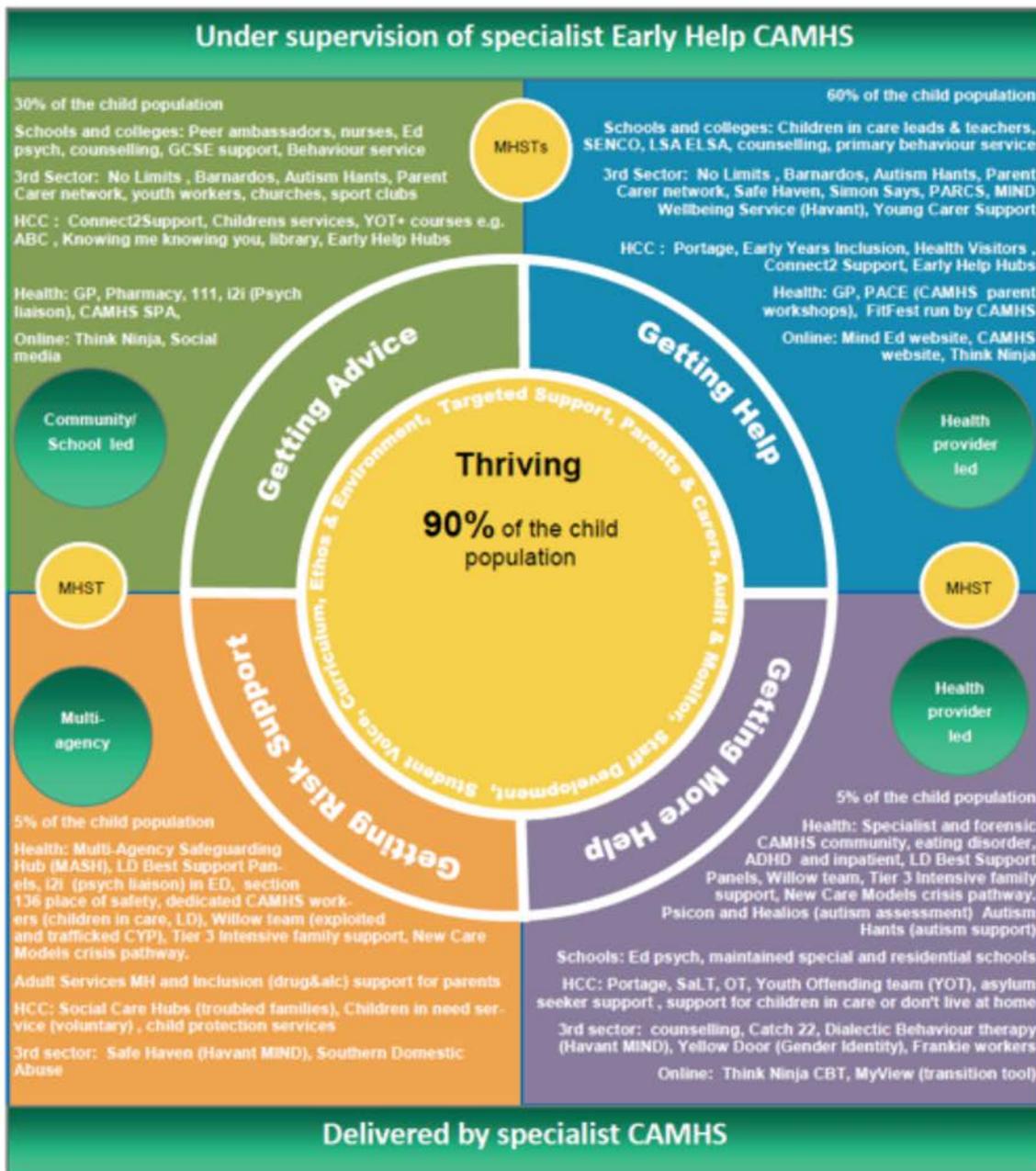
Achieving Our Local Priorities

This section explains how we link our local priorities to need, current performance, the money we have to invest and to what children and young people tell us as set out in pages 14 to 41.

Our aim is to act early to prevent harm, by investing in the early years, supporting families and those who care for children and building resilience through to adulthood. Strategies should be developed in partnership with children and young people to support self-care. this will reduce the burden on mental and physical ill health over the whole life course.

(Future in Mind, 2015)

We will work with our partners and providers to deliver intervention and prevention at the earliest opportunity. Our Hampshire CAMHS team have adapted the I-Thrive Model <http://implementingthrive.org/wpcontent/uploads/2019/03/THRIVE-Framework-for-system-change-2019.pdf> and we have worked with stakeholders to identify where all services across the system can contribute to meeting needs of CYP much earlier, thereby reducing referrals into specialist CAMHS which in turn will improve waiting times. We will also work with our Isle of Wight CAMHS team to adopt a similar approach.



Moving On

Primary Care, Inspire Create Exchange project (ICE) run by CAMHS, Mental Health First Aid (resilience) training, Intensive Home treatment (i2i), care education and treatment reviews, section117 aftercare, Tier 4 CAMHS, Transition Protocol to adult services

Family, school, community and social media

Adapted from THRIVE elaborated framework (Wolpert, M., Harris, R., Hodges, S., Fuggle, P., James, R., Wiener, A., McKenna, C., Law, D., York, A., Jones, M. and Fonagy, P. (2015) *THRIVE elaborated*)





Local priorities for Hampshire and the Isle of Wight are aligned with the Joint Emotional Wellbeing and Mental Health Strategy for Children and young people 2019 – 2024 and are developed by following the commissioning cycle, the key priorities are:

1. Children and young people's emotional wellbeing and mental health is everybody's business
2. Support for good mental health of parents
3. Whole school /educational settings approach to mental health
4. Supporting mental health of vulnerable children and young people
5. Reducing rates of self-harm
6. Improvement of service provision.
7. Improving access and waiting times for Child and Adolescent Mental Health Services

1

Local Priority 1:

Children and young people's emotional wellbeing and mental health is everybody's business

Core Offer

Provider/Project	Service	Outcomes/Aims
System Wide Partners	<p>Having a clear governance framework is of paramount importance so we can ensure a joint approach to meeting the needs of young people</p> <p>Governance will be led strategically at the STP level and locally through local forums</p> <p>Meeting the needs of children and young people is everyone's business and we need to work collectively by upskilling our whole workforce, ensuring we have clear protocols and pathways and clarity of signposting so that young people get the best support they can when they need it.</p>	<ul style="list-style-type: none"> • All partners and providers feel equal in terms of opportunities to contribute to wider strategies and shape future services; • The workforce receives consistent and joined up messages/ways of working and can make informed decision and recommendations related to appropriate service pathways for children and young people. • We will build on our collective knowledge of services and develop a local directory of services and how to access them so that everyone understands the tapestry of services available
Hampshire CAMHS	<p>Currently delivers clinical supervision and education to a number of support services including YOT, Social Care, Schools and Primary Care Mental Health Workers.</p> <p>The Hear Me Campaign - made up of a number of creative, innovative and inclusive projects and events to benefit young people, parents/carers and professionals.</p> <p>The Everybody Campaign - made up of a number of creative, innovative and inclusive projects and events which will benefit young people, parents/carers and professionals.</p>	<ul style="list-style-type: none"> • High quality, consistent and safe services are delivered to children and young people regardless of the provider and/or authority; • Train, support and advise the systemic network that supports these young people in order to enhance their work with young people in their care and ensure its effectiveness; • Raise awareness and promote better understanding of eating disorders; • Improve knowledge and encourage early identification of eating disorders; • Promote awareness of where and how to make referrals to Hampshire CAMHS Specialist Eating Disorder Team; • Improve body image acceptance, self-esteem and confidence in young people; • Promote compassion and kindness • Inspire and empower young people to develop positive ways of coping.

No Limits Community Counselling	Works with schools to train staff to identify emotional and mental health needs of CYP at the earliest opportunity.	<ul style="list-style-type: none"> Schools feel empowered and equipped to make informed decisions and recommendations related to appropriate services for CYP.
St Marys CAMHS	Provides clinical supervision to YOT and Looked After Children Nursing team.	<ul style="list-style-type: none"> Service designed for vulnerable groups follow consistent and high quality models to ensure appropriate mental health and emotional wellbeing support is delivered – ensuring equity of care.
St Marys Occupational Health team	Delivers ASC awareness workshops to schools to help staff recognise and respond to need.	<ul style="list-style-type: none"> Schools learn to quickly recognise needs of children and people presenting with traits of ASC and other conditions such as Attachment Disorder.; Schools learn how to support those needs at a local level by developing an inclusive, in-house offer in education settings without defaulting to Education Health and Care Plan (EHCP) applications and/or recommending a diagnostic assessment straightway; Children, young people and families feel supported and welcomed by schools, regardless of need – reduction in numbers of home educated children and young people.

Transformation Plans

Provider/Project	Service Progress	Outcomes/Aims
Working together as system partners	<p>To upskill the Education workforce in developing the skills to manage and support CYP with atypical sensory presentation related to their learning disability and/or autism.</p> <p>The focus will be on developing a train the trainer approach, employing a highly specialist occupational therapist to develop a training programme which will:</p> <ul style="list-style-type: none"> focus initially on upskilling the workforce in our special school and college provision (2-19); developing a school's information pack; cascading a training programme through a "train the trainer" approach to reach schools and colleges across the TCP who have the highest level of need. <p>The role will be embedded into one of the local community trusts (to be determined) but will work across the TCP.</p>	<ul style="list-style-type: none"> A more confident resilient school's workforce equipped to deal with children with autism and learning disabilities; CYP enabled to settle in local education placements, leading to fewer placements outside the county boundary; Increased parental confidence in local education provision leading to fewer appeals via Tribunal; Fewer admissions to Tier 4 (inpatient) provision.

<p>Restorative Practice</p>	<p>The Hampshire and Isle of Wight Children's Mental Health Commissioning team attended Restorative Practice training in early October 2019 along with agencies from across the system.</p> <p>"The fundamental premise of restorative practices is that people are happier, more cooperative and productive, and more likely to make positive changes when those in positions of authority do things with them, rather than to them or for them".</p> <p><i>International Institute of Restorative Practices</i></p> <p>Restorative Practice underpins the Hampshire County Councils 'Hampshire Approach' model which focuses on delivering system wide change that places children and families at the centre of a multi-disciplinary service, based around a single approach and evidence based practice.</p>	<ul style="list-style-type: none"> • The service model will be supported by process and technology, driving efficiencies to release capacity of staff so they can undertake evidence - based work with children and families, building strength and resilience in families; • Agencies across health, social care and education are committed to promoting restorative practice techniques and language to develop and sustain effective partnership working.
<p>Healios Think Ninja</p>	<p>This service is currently being piloted to test out a new self - help smartphone app which provides emotional wellbeing support to children and young people. The tool is built on proven therapy-based techniques such as cognitive behavioural therapy (CBT) and motivational interviewing, to help deal with anxiety and low mood. ThinkNinja also contains other really useful techniques such as mindfulness meditation and relaxation techniques to help with mental health, emotional wellbeing and resilience.</p> <p>Alongside the app, training is delivered to all school teaching staff to embed supportive techniques into the classroom environment and identify and respond to needs at the earliest opportunity.</p>	<ul style="list-style-type: none"> • CYP people will have instant access to support which help them manage and cope better. The hope is that the app will reduce the burden on schools and NHS mental health services.



Primary Behaviour Service

Supports Hampshire primary schools with children who have social, emotional and mental health needs that result in distressed behaviours in school.

The service primarily works with mainstream primary schools, supporting children who do not currently have an EHCP and who go to school in Hampshire. This includes children who live in a bordering local authority but attend a Hampshire primary school. By providing early, targeted support through a child-centred approach, the service aims to:

- remove barriers to learning;
- help children get the most from their education and reduce exclusion;
- Assessment and identification of a pupil's individual needs relating to behaviour and emotional wellbeing. This ensures that any early intervention and support is appropriate;
- Hands-on advice and support for classroom staff and school leadership teams, for a wide range of behavioural, emotional and social development needs;
- Support for parents/carers, including help with developing a positive home/school relationship, as well as direct work with parents/carers;
- Training and development for school staff, including sharing of skills and best practice;
- Transition support between schools, key stages or during a move to/from specialist provision;
- Access to six in-reach centres, which offer part time provision to complement mainstream school placement. The centres offer a tailored curriculum designed for each pupil to ensure maximum inclusion at school;
- support to schools about crisis management and conflict resolution;
- support and advice to schools during assessment for EHCP;
- supporting schools to meet the needs of children who are unable to attend school for medical reasons.

Recurrent funding of £50k has recently been agreed by health commissioners to joint fund this service alongside the Isle of Wight Local Authority – to commence 1st April 2020.

- Children learn strategies that work for them, so that they can self-regulate their behaviour;
- Children have their individual needs met, helping them to develop their strengths, emotional resilience and independence. They become better engaged with their learning and can access more of the curriculum. Staff in mainstream schools have increased understanding, confidence and knowledge, and are better equipped to work with distressed behaviours. The service supports the positive relationships and partnership working between schools, families and children, resulting in a consistent approach to behaviour at home and school.

Mental Health Support in Schools

Hampshire was recently successful in securing £720k to implement the Mental Health Support Team in schools project which is a national initiative project run by the NHS and the Department of Education and is designed to help improve schools approaches to CYP mental health and provide additional capacity, supplementing specialist NHS services.

The Hampshire Mental Health Support Team (MHST) programme will be rolled out during the latter half of 2019 in Gosport and Havant. The Isle of Wight will be submitting a bid for MHST in Wave 4 (January 2020).

As part of the initiative, the government has committed:

- Funding for new MHSTs, to provide extra capacity for early intervention and ongoing help within a school and college setting;
- Encouraging schools and colleges to identify a senior mental health lead, with a new offer of training to help leads and staff to deliver whole school / college approaches to promoting better mental health;
- Mental Health Awareness Training for a member of staff from all state-funded secondary schools in England by March 2020;
- National roll out of the Mental Health Services and school/college Link Programme training nationally from Autumn 2019, supporting stronger partnerships between schools and colleges and local specialist NHS Children and Young People's Mental Health Services (CYPMHS).



Local Priority 2:

Support for good mental health of parents

Core Offer

Provider/Project	Service	Outcomes/Aims
Hampshire County Council – Support and advice for parents carers	<p>Connect to Support Hampshire Local groups, activities and services within the community as well as formal care services for adults.</p> <p>Family Information and Services Hub Information about what is going on locally, details on how to access services, organisations and activities in Hampshire, and the advice and support that's available for children and families.</p> <p>Five ways to wellbeing resources to help improve enjoyment of life, self-esteem and engagement with the world around you; supporting wellbeing.</p> <p>Relate offers relationship support to couples, families and individuals.</p> <p>I Talk offers support to people with common mental health problems including depression and anxiety. The service is open to anyone aged 16 and over who is registered with a GP in the localities of Andover, Basingstoke, Bordon, Eastleigh, Fareham, Gosport, Havant, New Forest, Petersfield, Romsey and Winchester</p> <p>Parental mental illness: the impact on children and adolescents for parents and carers information from the Royal College of Psychiatrists</p> <p>Family Support Service a County Council service for families with children aged 0–19 years (or up to 25 for young adults with learning difficulties and/or disabilities).</p>	<p>Families are supported as a 'whole'. Services recognise that the mental health and emotional wellbeing needs of the individual child or parent/carer should not be addressed in isolation to the wider family unit.</p> <p>Families feel supported and able to build ongoing positive and supportive family dynamics.</p>
Hampshire Parent Carer Network	We continue to commission the 'Futures in Mind' project delivered by Hampshire Parent Carer Network which provides intervention, aimed at improving the wellbeing of parent carers of children and young people aged 0-25 years.	<ul style="list-style-type: none"> • Parents and Carers recognise own resilience and individual strengths • Pathways to community and peer support are created and focus on the wellbeing of parent carers to improve the outcomes of the CYP under their care.

<p>Barnardo's Family Support (Hampshire and Isle of Wight)</p>	<p>Specialist parenting support services across Hampshire and Isle of Wight. The service offers both group based and 1:1 programmes for parents of children and young people distressed behaviours associated with mild-moderate conduct disorders, Autism, ADHD or are teenagers displaying anti-social behaviour including child of parent violence. Practitioners work in close partnership with colleagues from local authority Family Support and Early Help Services and the Supporting Families Programme.</p>	<ul style="list-style-type: none"> • Parents and carers feel better able to manage distressed behaviour presented by children and implement mechanisms to create a positive home environment. • Promote resilience which enables the child to cope with life's ups and downs and to 'bounce back' in the face of difficulties. It can help to mitigate the effect of some of the risk factors for adverse outcomes in adult life.
<p>Hampshire CAMHS Website</p>	<p>The Hampshire CAMHS website was developed in 2017 to prove a portal of mental health and emotional wellbeing resources for parents and professionals. The website is regularly reviewed and updated.</p>	<ul style="list-style-type: none"> • Fully accessible website for anyone to find specific guidance in relation to the different mental health difficulties that they may be experiencing. • Families can access high quality guidance and self - help and top tips to help manage mental health emotional wellbeing difficulties together as a family.
<p>Parenting workshops for parents of children presenting with traits of an/ or diagnosed with Autism – St Mary's Occupational Therapy Team</p>	<p>Group based workshops focusing on educating parents and carer about Autism and how they can support children to achieve the best outcome possible.</p>	<ul style="list-style-type: none"> • Parents gain a better understanding of Autism as a lifelong condition; • Parents feel more confident to effectively manage behaviours by using tools and techniques provided by ASC specialist Occupational Therapists.



Transformation Plans

Provider/Project	Service Progress	Outcomes/Aims
<p>Isle of Wight Early Help Strategy</p>	<p>It is estimated that over two million children in the UK are living in difficult family circumstances. These include children who are affected by neglect, parental mental ill health and substance abuse and parental conflict. An effective early help strategy should provide the best quality professional help at the earliest opportunity to prevent difficulties escalating, family circumstances deteriorating and reduce the risk of children suffering significant harm.</p> <p>Commissioners are key stakeholders building the 2019 IOW Council's Early Help Strategy. Early Help covers a wide array of services and different sectors including education, health, and crime. Children and families can experience an array of difficulties at the same time and therefore developing a co-ordinated approach to assessing what the issues are and bringing together the right team of people around the family is essential to delivering a holistic, collaborative plan of support.</p> <p>There is a clear process in place for families to access early help services with multi-agency co-ordination via the early help service. There are a range of intervention services available depending on the level of need. Lead professionals are drawn from a large cohort of staff trained across partner agencies (pre-schools, schools, family centres, health professionals, voluntary sector and support is provided by local authority Early Help Co-ordinators. This well-developed approach includes; workforce development, Early Help locality hub meetings, early help audits for quality assurance, peer supervision, surgeries, telephone consultation line, joint visiting and training opportunities to share good practice. It has successfully built significant capacity and confidence across multi-agency practitioners in regards to early help planning and support.</p> <p>The early help offer improves the child's situation and supports sustainable progress and outcomes for children.</p> <p>Part of the early help offer is commissioned by the local authority through Barnardo's who provide a range of interventions and support through a network of 0-19 Family Centres for cases assessed to be at level 2 and 3, (including the Troubled Families programme). The model of 0-19 Family Centres has been identified by the Children's Commissioner for England as a model of good practice. Family Centres work in partnership with voluntary and statutory services with health being a key partner. The services provided from the centres are targeted at families most in need. There is excellent engagement with the voluntary sector. Children's social care has commissioned Home Start to recruit and train volunteers specifically to work with families with children subject to child protection.</p> <p>The Isle of Wight council commissions other early help provision through the Short Breaks programme, Special Educational Needs and Disabilities (SEND) and young carers support.</p>	<p>323 early help assessments were received during the period April 2017-March 2018 compared to 368 in 2016/17, a decrease of 12%. The top presenting factors have not changed at over the past 2 years. Poor mental health of both adults and children are some of the highest factors seen, alongside behavioural issues and relationship difficulties within the home.</p> <p>There were:</p> <ul style="list-style-type: none"> • 80 (27%) step downs compared to 128 (35%) step downs in 2016/17 • 51 (18%) step ups to CSC from early help compared to 53 (14%) in 2016/17 <p>64% of cases who were closed to Targeted Early Help during 2017 - 2018 did so having achieved positive outcomes for the child and family. Only 18% were stepped up to Children's Services-demonstrating the positive impact of the co-ordinated delivery of early help services.</p> <p>This suggests that the early help offer remains stable, accessible, and consistent and that partner agencies remain confident in the assessment and effectiveness of early help. Schools, Family Centres, Health Visitors, voluntary organisations and School Nurses undertake the majority of lead professional roles.</p> <p>The Early Help Strategy aims to:</p> <ul style="list-style-type: none"> • Ensure effective use of resources-integrated commissioning informed by needs assessment; • Revise the Isle of Wight Early Help Offer, with contributions across all Children's Trust partners and publicise with families ; • Further develop evidence based early help approach to child and parental emotional wellbeing; • Deliver early help targeted at substance misuse and domestic abuse; • Review current early help assessment and planning process to develop strengths based approach-that includes wider family and community to promote resilience in conjunction with Children's Services Transformation programme. <p>The above aims will be monitored through the Early Help Board and reported annual to the Children's Trust.</p>

<p>Hampshire Early Help Services</p>	<p>The Early Help model is coordinated through ten multi-agency hubs: Eastleigh, Gosport, Test Valley, Basingstoke, Hart and Rushmoor, New Forest, Havant, Winchester, Fareham and East Hants.</p> <p>The hubs are coordinated by the Family Support Service (FSS) and involve a range of practitioners who contribute to the local Early Help offer.</p> <p>FSS is part of the 'early help' provision for Hampshire run by the County Council for families with children aged 0 to 19 years (or up to 25 for young adults with learning difficulties and/or disabilities) to provide a joined-up, whole-family service to those who have high levels of need including:</p> <ul style="list-style-type: none"> • family relationships • behaviours that are challenging • housing issues • emotional and mental health • healthy relationships • alcohol and drug issues 	<ul style="list-style-type: none"> • By enabling children and young people to access the support they need earlier, and in familiar settings, it will in turn reduce the burden on specialist CAMHS. This enables quicker assessment, treatment and support to those who still need it.
<p>IOW CAMHS Website</p>	<p>It has been recognised that the Isle of Wight CAMHS website requires significant improvement. Commissioners plan to work with the provider, CYP and their families to develop an online portal of resource and guidance.</p>	<ul style="list-style-type: none"> • Build parent knowledge in order to recognize and respond to symptoms of mental health issues as early as possible; • Parents will understand the difference between mental health issues and emotional wellbeing issues, and how to support both in the home. • Families can download resources and follow informant guides to respond to distressed behavior whilst their child is waiting for CAMHS assessment/treatment • Families can explore complementary support services as signposted by CAMHS; • Parents and CYP will receive high quality and expert information relating to mental health and emotional wellbeing issues.

3

Local Priority 3:

Whole school /educational settings approach to mental health

Core Offer

Provider/Project	Service	Outcomes/Aims
Primary Behaviour Service	<p>Supports Hampshire primary schools with children who have social, emotional and mental health needs that result in distressed behaviours in school.</p> <p>The service primarily works with mainstream primary schools, supporting children who do not currently have an EHCP and who go to school in Hampshire. This includes children who live in a bordering local authority but attend a Hampshire primary school. By providing early, targeted support through a child-centred approach, the service aims to:</p> <ul style="list-style-type: none"> • remove barriers to learning; • help children get the most from their education and reduce exclusion; • Assessment and identification of a pupil's individual needs relating to behaviour and emotional wellbeing. This ensures that any early intervention and support is appropriate; • Hands-on advice and support for classroom staff and school leadership teams, for a wide range of behavioural, emotional and social development needs; • Support for parents/carers, including help with developing a positive home/school relationship, as well as direct work with parents/carers; • Training and development for school staff, including sharing of skills and best practice; • Transition support between schools, key stages or during a move to/from specialist provision; • Access to six in-reach centres, which offer part time provision to complement mainstream school placement. The centres offer a tailored curriculum designed for each pupil to ensure maximum inclusion at school; • support to schools about crisis management and conflict resolution; • support and advice to schools during assessment for EHCP; • supporting schools to meet the needs of children who are unable to attend school for medical reasons. <p>Recurrent funding of £50k has recently been agreed by health commissioners to joint fund this service alongside the Isle of Wight Local Authority – to commence 1st April 2020.</p>	<ul style="list-style-type: none"> • Children learn strategies that work for them, so that they can self-regulate their behaviour; • Children have their individual needs met, helping them to develop their strengths, emotional resilience and independence. They become better engaged with their learning and can access more of the curriculum. Staff in mainstream schools have increased understanding, confidence and knowledge, and are better equipped to work with distressed behaviours. The service supports the positive relationships and partnership working between schools, families and children, resulting in a consistent approach to behaviour at home and school.

<p>Mental Health Support in Schools</p>	<p>Hampshire was recently successful in securing £720k to implement the Mental Health Support Team in schools project which is a national initiative project run by the NHS and the Department of Education and is designed to help improve schools approaches to CYP mental health and provide additional capacity, supplementing specialist NHS services.</p> <p>The Hampshire Mental Health Support Team (MHST) programme will be rolled out during the latter half of 2019 in Gosport and Havant. The Isle of Wight will be submitting a bid for MHST in Wave 4 (January 2020).</p>	<p>As part of the initiative, the government has committed:</p> <ul style="list-style-type: none"> • Funding for new MHSTs, to provide extra capacity for early intervention and ongoing help within a school and college setting; • Encouraging schools and colleges to identify a senior mental health lead, with a new offer of training to help leads and staff to deliver whole school / college approaches to promoting better mental health; • Mental Health Awareness Training for a member of staff from all state-funded secondary schools in England by March 2020; • National roll out of the Mental Health Services and school/college Link Programme training nationally from Autumn 2019, supporting stronger partnerships between schools and colleges and local specialist NHS Children and Young People's Mental Health Services (CYPMHS).
<p>Hampshire CAMHS Campaigns</p>	<p>Hampshire CAMHS have an engagement officer in post who delivers specific campaigns depending on need identified through their engagement work with CYP and families.</p> <p>Campaigns run throughout the year at various locations around the county and information can be found at https://hampshirecamhs.nhs.uk/campaigns/</p> <p>This is additional to Hampshire CAMHS core contract.</p>	<p>The Campaign for 2019 is the "Hear Me" campaign and focusses specifically on children in care and the aims are:</p> <ul style="list-style-type: none"> • To provide opportunities directly with young people to gain skills that enhances their self-worth, empowers them to achieve their potential, and increase self-confidence which in turn will improve their emotional and mental health. • To train, support and advise the systemic network that supports these young people in order to enhance their work with young people in their care and ensure its effectiveness. • To provide young people across Hampshire with the chance to contribute and feedback to wider conversations about pertinent issues relating to young people's health and wellbeing. <p>Previous campaigns have focussed on:</p> <ul style="list-style-type: none"> • 2018 – Every body matters – focussing on eating disorders and body image • SAFE campaign – focussing on suicide awareness.

Transformation Plans

Provider/Project	Service Progress	Outcomes/Aims
<p>Mental Health Support in schools</p>	<p>Submit a bid for the Isle of Wight to implement the Mental Health Support Team in schools project which is a national initiative project run by the NHS and the Department of Education and is designed to help improve schools' approaches to CYP mental health and provide additional capacity, supplementing specialist NHS services.</p> <p>The Hampshire Mental Health Support Team (MHST) programme will be rolled out during the latter half of 2019 in Gosport and Havant. The Isle of Wight will be submitting a bid for MHST in Wave 4 (January 2020).</p>	<p>As part of the initiative, the government has committed:</p> <ul style="list-style-type: none"> • Funding for new MHSTs, to provide extra capacity for early intervention and ongoing help within a school and college setting; • Encouraging schools and colleges to identify a senior mental health lead, with a new offer of training to help leads and staff to deliver whole school / college approaches to promoting better mental health; • Mental Health Awareness Training for a member of staff from all state-funded secondary schools in England by March 2020; • National roll out of the Mental Health Services and school/college Link Programme training nationally from Autumn 2019, supporting stronger partnerships between schools and colleges and local specialist NHS Children and Young People's Mental Health Services (CYPMHS).



4

Local Priority 4:

Supporting mental health of vulnerable children and young people

Core Offer

Provider/Project	Service	Outcomes/Aims
Adverse Child experience – Trauma Informed	<p>In the last ten years a significant body of evidence has developed on the impact of ‘Trauma Informed Childhood Experiences’ in terms of poorer outcomes in later life which includes childhood abuse or neglect, exposure to domestic abuse, parental substance misuse, parental mental ill health and bereavement.</p> <p>Studies have confirmed a strong correlation between experiencing a higher number of ACE’s and the subsequent risks to the individual in relation to mental ill health, chronic diseases, involvement in criminal activity and other poor outcomes in later life. At least one quarter of the population have experienced four or more recognised traumas during childhood.</p> <p>Support for this cohort of children will be identified through the early help assessment or if required a child and family assessment within children’s social care. NHS Commissioners are part of the working groups focusing on this cohort.</p>	<ul style="list-style-type: none"> • Ensure that the needs of this cohort are recognised at the earliest opportunity and responded to. • Work across the system to develop an integrated pathway for this cohort to ensure the best outcome in terms of educational, social and emotional wellbeing
Frankie Workers	<p>The Police and Crime Commissioners launched a dedicated counselling service for victims of child sexual abuse. The service, called Frankie Workers, is inspired by Frankie, an adult survivor of child sexual abuse. The Frankie Worker offers outreach therapeutic counselling to those aged 0 to 18 years who are traumatised as a result of being missing, exploited, trafficked or sexually abused. Individuals are seen for around 14 weeks (one session a week) depending on need.</p>	<ul style="list-style-type: none"> • Continue to invest and build on already established partnership working with this service.

Willow Team	<p>The Willow Team is a multi-agency team that specifically addresses the needs of children who repeatedly go missing, or are at risk of exploitation and/or trafficking.</p> <p>The team operates across the Hampshire Local Authority area and receives referrals from Hampshire's Multi Agency Safeguarding Hub (MASH) relating to children who are not currently open to Children's Social Care and where concerns are raised that they are at risk of exploitation/missing or being trafficked; and/or children who are in contact with known perpetrators of child exploitation.</p>	<ul style="list-style-type: none"> • Continue to invest and build on already established partnership working with this service.
Solent NHS Trust delivering the Sexual Assault Referral Centre (SARC)	<p>Known as 'Treetops, which is located in Cosham, Portsmouth, and whose remit spans across Hampshire and the Isle of Wight and provides expert care and support to people following their involvement in what can only be described as one of the most traumatic experiences a person can suffer.</p>	<ul style="list-style-type: none"> • The centre offers a supportive environment where specially trained doctors and project workers can see a client through forensic examination, getting counselling and ongoing support, screening for possible sexually transmitted infections, or reporting the incident to the police.
Youth Offending teams	<p>Two Specialist Trauma Counsellors are based in the Hampshire YOT team with 0.5 equivalent in the IOW Youth Offending Service/Team. Treatment will include Somatic experiencing, CBT (cognitive behaviour therapy) and EMDR Eye movement desensitisation and reprocessing).</p> <p>The Counsellor will provide effective and evidence-based interventions, for example; NICE Clinical Guidelines (depression), (anxiety) (Post Traumatic Stress Disorder) and (Attachment Difficulties).</p> <p>Face-to-face therapeutic support will be child and young person centred and tailored to individual need and presenting problems. As such the Counsellor must be able to provide a range of different interventions. All therapies/counselling are delivered in line with the BACP (British Association of Counselling and Psychotherapy) or UKCP (UK Council for Psychotherapies) guidance and standards.</p>	<ul style="list-style-type: none"> • Reduce reoffending by supporting emotional needs and support individuals to re-enter education.
Breakout Youth	<p>Breakout Youth Hampshire and Isle of Wight wide charity offering support to young people aged 11-21 (up to 25, with additional needs) who identify as LGBTQ+.</p>	<ul style="list-style-type: none"> • Reduce rates of self harm/suicidal intent • Promote inclusivity • Reduce family breakdown • Ensure the best outcomes in terms of social, emotional and educational well being for this cohort of young people.

Transformation Plans

Provider/Project	Service Progress	Outcomes/Aims
<p>The Southampton, Hampshire, Isle of Wight and Portsmouth (SHIP) Transforming Care Partnership (TCP)</p>	<p>The Southampton, Hampshire, Isle of Wight and Portsmouth (SHIP) Transforming Care Partnership (TCP) will contribute to support the delivery of person-centred, strengths-based and coordinated health and social care, and support through delivery against its vision to “Build on a Child, Young Person’s or Adult’s unique strengths and abilities, getting it right for the person first time through ensuring there is the right care in the right place at the right time that is consistent across the SHIP TCP”.</p> <p>Specifically, the Transforming Care Partnership is working towards:</p> <ul style="list-style-type: none"> • Implementing early intervention and prevention agendas to avoid people being admitted to hospital, this includes supporting good physical health as well as mental health and having learning disability friendly GP practices • Improving access to timely assessment, diagnosis and support (which may be required life-long). • Appropriate intensive and crisis support • Increase the number of Annual Health Checks • Improve health outcomes, e.g. via screening programmes • Participating in the roll-out of STOMP (Stopping Over Medication of People with a learning disability, autism or both) • Closing the life expectancy gap between people with Learning Disability, and/or autism and the general population • Reducing the number of inpatients in specialist learning disability units • Reducing the length of stay for those individuals requiring assessment, diagnosis and treatment within inpatient settings. • Improve the training, support and development of all support staff, including unpaid and family carers (including Learning Disability awareness training for mainstream and not just specialist services) • Bringing people back who are living in residential placements out of the Hampshire & Isle of Wight area, reducing the need for care away from home, their families and communities 	<p>Expected Outcomes are:</p> <ul style="list-style-type: none"> • Young people are educated in their local in day school for longer • Young people avoid residential placement • Use of physical restraint / seclusion / restrictive practices will reduce • Better cross-organisation understanding about Positive Behaviour Support. • Better Local Offer. • Children’s Services and SEN <p>The specialist team for this initial pilot will be commissioned from The Centre for the Advancement of Positive Behaviour Support (CAPBS)</p> <ul style="list-style-type: none"> • A more confident resilient school’s workforce equipped to deal with children with autism and learning disabilities • CYP enabled to settle in local education placements, leading to fewer placements outside the county boundary. • Increased parental confidence in local education provision leading to fewer appeals via Tribunal. • Fewer admissions to Tier 4 provision • Shorter stays and earlier discharges from hospital <p>How does this work to achieve the ambitions of the NHS Long Term Plan?</p> <ul style="list-style-type: none"> • By taking a proactive approach and developing robust local community services for children with LD and autism. • By improving the skills of schools workforce and thereby aligning SEN and LD/Autism transformation • By embedding a financially sustainable model through a “train the trainer approach”

The Southampton, Hampshire, Isle of Wight and Portsmouth (SHIP) Transforming Care Partnership (TCP)

(continued)

- Increase the offer and uptake of personal budgets
- Increase the number of personal assistants available in the region
- Work with providers to expand and build upon the use of Positive Behavioural Support rather than physical interventions as a means of managing behaviour that challenges
- Establish robust care planning processes, including relapse prevention strategies with pre-agreed funding in place either directly funded or via personal budgets to help keep people well
- Establish a community forensic rehabilitation service
- Develop a joint Regional approach to Housing Development and a portfolio of housing options for individuals.
- Care and Treatment Reviews (CTR's) are being carried out to reduce the number of children and adults being admitted to learning disability and mental health hospitals.

Since the last refresh the following projects have been progressed:

- Reviewed and improved the Care, Educations, Treatment & Review (CET) process across Hampshire and Isle of Wight joining up CAMHS, social care, education and children's services much more effectively
- Recruited a Transforming Care Project lead
- Recruited a Learning Disability Nurse Assessor to strengthen the children's collaborative team
- Invested into the Hampshire County Council Primary Behaviour Service to employ trained practitioners to work with schools and support children with distressed behaviours and learning disabilities.
- Introduced the Best Support Register across Hampshire and Isle of Wight
- Introduced the Transforming Care Panel to jointly review then agree care packages between health and social care.

Two new bids have recently (September 2019) been approved by the SHIP Transforming Care Partnership to further improve services and respond to aspirations within the NHS Long Term Plan:

The Southampton, Hampshire, Isle of Wight and Portsmouth (SHIP) Transforming Care Partnership (TCP)

(continued)

Understand and reduce the use of restrictive practice in school by implementing Positive Behaviour Support:

- A review of policy and procedures and recording systems
- Audit of staff needs including learning and development needs / attitudes and attributions / stress levels
- Restrictive practices and reduction strategies audit
- Behaviour Support Plan audit
- Stakeholder consultations
- Ongoing advisory consultancy support factored in for a specified period of time
- Review of client interactions

The pilot school will:

- be Local Authority funded and situated in Hampshire
- cater for secondary-aged / 16-19 pupils with autism, moderate/ severe learning disability and behaviour that challenges
- have pupils on-roll who have 2:1 staffing to manage needs relating to behaviour or have daily routines that isolate and segregate them from their families or peers be selected in consultation with CAMHS,

To upskill the education workforce in developing the skills to manage and support children and young people with atypical sensory presentation related to their learning disability and/ or autism.

The focus will be on developing a train the trainer approach, employing a highly specialist occupational therapist to develop a training programme which will

- focus initially on upskilling the workforce in our special school and college provision (2-19)
- developing a school's information pack
- cascading a training programme through a "train the trainer" approach to reach schools and colleges across the TCP who have the highest level of need

The role will be embedded into one of the local community trusts (to be determined) but will work across the TCP

LGBTQ++ - Hampshire CAMHS – part of the RESPECT project Free training for professionals (education, social care, health, voluntary sector) on LGBTQ+ in youth including considering factors such as mental health.

LGBT+ Suicide and Self Harm Prevention Training is a 1 day interactive, informative and thought provoking face-to-face workshop, that allows participants to experience how it may feel to be in the shoes of an LGBT+ person in our society, and highlights the difficulties faced on a day to day basis by LGBT+ people.

The objective of the workshop is to:

- a. Improve the ability of organisations, teams and suicide programmes who work with the LGBT+ community to identify individuals who are suicidal or whom deliberately self-harm.
- b. After the training workshop participants will have the following skills:
- c. Ability to describe relevant research related to LGBT+ Suicide behaviour and self-harm
- d. Ability to discuss LGBT+ suicide/ self-harm risk and protective factors
- e. Ability to assess LGBT+ Cultural competence of team/ organisation
- f. Ability to increase personal LGBT+ cultural competence



5

Local Priority 5:

Reducing rates of self-harm

Core Offer

Provider/Project	Service	Outcomes/Aims
Hampshire CAMHS campaigns	<p>LGBTQ+ SUICIDE PREVENTION AND SELF HARM TRAINING</p> <p>This training can be booked via our website: www.hampshirecamhs.nhs.uk</p> <p>Free training for professionals (education, social care, health, voluntary sector) on LGBTQ+ in youth including considering factors such as mental health.</p> <p>Monitor rates of self harm referrals into CAMHS and other services working with vulnerable groups</p>	Recognise the sign of self harm in children and young people at the earliest opportunity and provide safe pathways to offer support and reduce rates of self harm and escalation.

Transformation Plans

Provider/Project	Service Progress	Outcomes/Aims
Emotional Wellbeing and Mental Health Strategy for Children and young people in Hampshire – 2019 - 2024	<p>Support Local Authorities to:</p> <ul style="list-style-type: none"> • Undertake a review of the self-harm pathway for under 18s in Hampshire • Review Hampshire's statistical neighbours to identify any areas of good practice which can be used to address self-harm locally • Undertake engagement with young people who have experience of self-harm to help inform action to address issues 	<ul style="list-style-type: none"> • Reduce rates of self harm in children and young people • Support early identification • Support children and young people to understand why they self harm • Work with partners to prevent to 'glamour' associated with self harm • Reduce escalation • Recognise triggers for children and young people • Equip schools to identify signs at the earliest opportunity and provide support for children young people.

Mental Health Support in Schools

Hampshire was recently successful in securing £720k to implement the Mental Health Support Team in schools project which is a national initiative project run by the NHS and the Department of Education and is designed to help improve schools approaches to CYP mental health and provide additional capacity, supplementing specialist NHS services.

The Hampshire Mental Health Support Team (MHST) programme will be rolled out during the latter half of 2019 in Gosport and Havant. The Isle of Wight will be submitting a bid for MHST in Wave 4 (January 2020).

- As part of the initiative, the government has committed:
- Funding for new MHSTs, to provide extra capacity for early intervention and ongoing help within a school and college setting;
- Encouraging schools and colleges to identify a senior mental health lead, with a new offer of training to help leads and staff to deliver whole school / college approaches to promoting better mental health;
- Mental Health Awareness Training for a member of staff from all state-funded secondary schools in England by March 2020;
- National roll out of the Mental Health Services and school/college Link Programme training nationally from Autumn 2019, supporting stronger partnerships between schools and colleges and local specialist NHS Children and Young People's Mental Health Services (CYPMHS).



6

Local Priority 6:

Improvement of service provision

Core Offer

Provider/Project	Service	Outcomes/Aims
Closer Working with Partners	We are aligning our priorities of the Hampshire 'Starting Well for Emotional Wellbeing and Mental Health Partnership' and 'The Isle of Wight 'Mental Health and Emotional Wellbeing Transformation Group (CYP)'	<ul style="list-style-type: none"> • Deliver objectives within the Local Transformation Plan as set out by Future In Mind.
Data Quality	We will work closer with our partners to truly understand the needs of our population. We recognise that there are gaps in our knowledge of the 'whole' child and will work to link our data streams with children's services and social care.	<ul style="list-style-type: none"> • Commission fit for purpose mental health and emotional wellbeing services. • Understand the impact of these services on children and young people.

Transformation Plans

Provider/Project	Service Progress	Outcomes/Aims
CAMHS Phased Investment	<p>An independent Demand and Capacity Peer review of Hampshire CAMHS has taken place.</p> <p>This has demonstrated the need for increased investment in order to reduce waiting times. A stakeholder workshop has also taken place to inform a plan to improve waiting times.</p>	<ul style="list-style-type: none"> • Implement findings of Independent Demand and Capacity Peer review in order to reduce waiting times.
Autism Assessments on the Isle of Wight	The Isle of Wight Autism Assessment service will move to a needs led model from 1st April 2020. As well as continuing to provide an assessment service, commissioners will also introduce early intervention support for families and schools (jointly commissioned with the local authority) and post diagnostic support services. Historically children and young people have been unable to access therapeutic intervention without a diagnosis of Autism Spectrum condition. From the 1st April 2020 this will no longer be the case and all children will be able to access the support they need.	<ul style="list-style-type: none"> • Assessments will not be a 'default' service for children and families. • An assessment for a diagnosis will be requested through a more informed process • Diagnosis rates will reduce; fewer assessments will cost less money. Savings will be re-invested into early support. • Needs will be identified much earlier • Children and young people will understand their needs at a much earlier stage. • Schools will feel more equipped to identify and support children and young people presenting with traits of Autism Spectrum Condition and/or Attachment Disorder. • A 'medicalised' culture will move to a 'needs led 'culture'

Hampshire
Autism
Assessment
service Review

Review of current service provision with a view to implementing a new long term pathway.

- System plans should set out how they will deliver the Long Term Plan commitments to improve services and outcomes for people with learning disabilities, autism or both, reducing the reliance on inpatient provision and increasing community capacity;
- To do this effectively, systems must ensure that they understand their local unmet need, gaps in care, including local health inequalities;



Local Priority 7:

Improving access and waiting times for Child and Adolescent Mental Health Services

Core Offer

Provider/Project	Service	Outcomes/Aims
Isle of Wight CAMHS	Review of Current Service Specification. Review and recommendations to be completed by 31st December 2019.	<ul style="list-style-type: none"> • Understand service gaps and recommission where appropriate • Enhance the core offer to include emotional wellbeing support for children and young people. More referrals will be accepted • Promote the current service and help families and professionals to understand the service offer • Introduce joint multi-disciplinary referral panels for children and young people with complex needs • Develop a 24/7 Crisis support service

Transformation Plans

Provider/Project	Service Progress	Outcomes/Aims
Hampshire CAMHS	<p>An independent Demand and Capacity Peer review of Hampshire CAMHS has taken place.</p> <p>This has demonstrated the need for increased investment in order to reduce waiting times. A stakeholder workshop has also taken place to inform a plan to improve waiting times.</p>	<ul style="list-style-type: none"> • Implement findings of Independent Demand and Capacity Peer review in order to reduce waiting times. • Additional investment will help services to reduce waiting times as we work towards national targets.

What are our risks and what are we doing about them?

Risk Factors and Protective Factors for Mental Health

Mental illnesses are a leading cause of health-related disabilities in children and young people and can have adverse and long-lasting effects. Good mental wellbeing in children is associated with better educational attainment and improved future prospects.

Risk Factors

<ul style="list-style-type: none"> ✗ Genetic influences ✗ Low IQ and learning disabilities ✗ Specific development delay ✗ Communication difficulties ✗ Difficult temperament ✗ Physical illness ✗ Academic failure ✗ Low self-esteem 	<ul style="list-style-type: none"> ✗ Family disharmony, or break up ✗ Inconsistent discipline style ✗ Parent/s with mental illness or substance abuse ✗ Physical, sexual, neglect or emotional abuse ✗ Parental criminality or alcoholism ✗ Death and loss 	<ul style="list-style-type: none"> ✗ Bullying ✗ Discrimination ✗ Breakdown in or lack of positive friendships ✗ Deviant peer influences ✗ Peer pressure ✗ Poor pupil to teacher relationships 	<ul style="list-style-type: none"> ✗ Socio-economic disadvantage ✗ Homelessness ✗ Disaster, accidents, war or other overwhelming events ✗ Discrimination ✗ Other significant life events ✗ Lack of access to support services
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 Child	 Family	 School	 Community
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<ul style="list-style-type: none"> ✓ Secure attachment experience ✓ Good communication skills ✓ Having a belief in control ✓ A positive attitude ✓ Experiences of success and achievement ✓ Capacity to reflect 	<ul style="list-style-type: none"> ✓ Family harmony and stability ✓ Supportive parenting ✓ Strong family values ✓ Affection ✓ Clear, consistent discipline ✓ Support for education 	<ul style="list-style-type: none"> ✓ Positive school climate that enhances belonging and connectedness ✓ Clear policies on behaviour and bullying ✓ 'Open door' policy for children to raise problems ✓ A whole-school approach to promoting good mental health 	<ul style="list-style-type: none"> ✓ Wider supportive network ✓ Good housing ✓ High standard of living ✓ Opportunities for valued social roles ✓ Range of sport/leisure activities
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Protective Factors

Our Risks

Description	Impact	RAG	Mitigation
<p>Referrals across mental health services are on the increase.</p> <p>Trajectories indicate that numbers will continue to outweigh capacity in all areas. Waiting lists are exceeding national waiting time standards in some areas. CYP will not be able to access the support they need.</p>	<ul style="list-style-type: none"> • CYP could potentially fail at school creating a life-long challenge for them, reducing their opportunity to thrive; • CYP could come to significant harm from risk taking behaviours due to high levels of vulnerability and reduced coping mechanisms; • CYP could inflict harm on other people, families, friends, others in society, which could have a negative impact of a severe magnitude; • CYP could impact on already overstretched adult mental health services, causing life-long costs to the system; • CYP could cause themselves significant self-harm, causing the acute system extra pressure; • The above will impact on other areas of the system such as education, safeguarding and social care. 	<div style="background-color: red; width: 100%; height: 100%;"></div>	<ul style="list-style-type: none"> • The Hampshire County Council Primary Behaviour Service (PBS) is jointly commissioned between the local authority and the CCGs in Hampshire. The service supports children who do not currently have an EHCP and who go to school in Hampshire; • By providing early, targeted support through a child-centred approach, the service aims to: <ul style="list-style-type: none"> – remove barriers to learning – help children get the most from their education – reduce exclusion • Isle of Wight is reviewing the current CAMHS model including remit and age range, linking in with perinatal and family support services; • An independent Demand and Capacity Peer review of Hampshire CAMHS has taken place. This has demonstrated the need for increased investment in order to reduce waiting times. • The CCG recognises that children who are presenting with multiple needs require multiple services. Therefore, Multi-disciplinary panels and Single Points of Access (SPAs) for transforming care and neuro-diverse conditions are being reviewed; • Referrals for vulnerable children (children in need, young offenders and learning disabilities) are prioritised. YOT mental health support is currently being reviewed; • In Hampshire, CAMHS are informed of those CYP on the waiting list who are at risk of school exclusion and referrals are re-prioritised as appropriate; • The CCG contributes to newly established groups focusing on ACEs and trauma Informed children and young people. We continue to invest in services for LGBTQ, sexually exploited and trafficked and/or abused CYP; • An early intervention self Help App: Think Ninja is being piloted across Hampshire to support children and young people to self-manage low levels of anxiety and low mood;



			<ul style="list-style-type: none"> • All HIOW CCGs are exploring ways to respond to the need for crisis intervention by coming together as a collective. Psychiatric liaison continues to be explored. The Hampshire CAMHS i2i service continues to effectively provide crisis support and the Isle of Wight CAMHS service has been awarded funding to provide an out of hours support service; • Three Safe Havens specifically for young people are now open in Hampshire (Aldershot, Havant and the Isle of Wight) to provide a safe space for children and young people to attending times of crisis and alleviate the pressure on Emergency Departments. • In addition to Barnardo's parenting support, the Hampshire Parent Carer Network deliver programmes of support for families experiencing distressed behaviours in the home; • Services for Autism across HIOW are currently being reviewed with online assessments piloted very successfully on the Isle of Wight in 2018/19. Online assessments are aimed at older teenagers and children; • Commissioners are working with third sector and community groups to enhance available support and make use of social prescribing opportunities, such as working with the fire service, wildlife trusts and scout groups.
	<ul style="list-style-type: none"> • Demand outweighing provider capacity is resulting in existing staff retention challenges, both of which contribute to a further reduction in capacity the capacity of the service and exacerbating the national challenges with mental health workforce recruitment. 		<ul style="list-style-type: none"> • The enhanced Evidence based practice programme (IAPT) should see a growth in the mental health workforce; • Commissioners are part of the Restorative Practice initiative which enables change through engagement, high challenge and high support within a respectful, exploratory environment.
Transition	<ul style="list-style-type: none"> • CYP may reach the age of 18/19 years before they are seen and will automatically be transferred to adult services where they will have to continue to wait even longer. 		<ul style="list-style-type: none"> • The joint Southampton, Hampshire, Isle of Wight and Portsmouth CCGs (SHIP) Transition protocol supports transition from children's to adult mental health services. • Online Autism assessments for older teenagers have provided very successful on the Isle of Wight. The service is like lobe included in the future model for Hampshire.

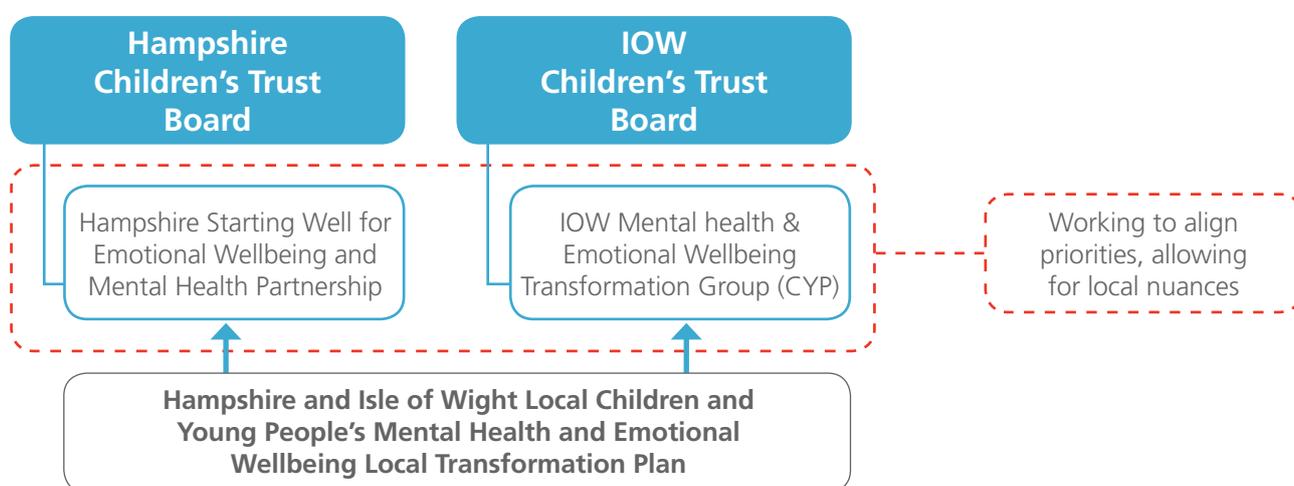


<p>Service Gaps</p>	<p>Gaps in service and/or systems working in isolation could result in children and young people being 'transferred between' different services and lack of specialist care for SEN, ASC and LD.</p>	<ul style="list-style-type: none"> • Children's representation at the quarterly SHIP TCP Board is now in place; • The Mandatory Dynamic Risk Register is now in place for HIOW; • The CYP Transforming Care Project is now part of New Care Models and also includes Southampton and Portsmouth; • The Care, Education and Treatment Reviews (CETRs) are showing that commissioned services are often not equipped to make the reasonable adjustments expected for LD and / or autism – work needed in this area. • Strategic meetings now established across HIOW and attended by health, social care, education and children's services. These meetings provide opportunities to co-design and joint fund services as well as highlight gaps and identify overlaps; • A review of all mental Health service specifications is underway; • Commissioners are focusing on engaging much more proactively with CYP , supported by Wessex Voices and Isle of Wight People Matter groups. • Current processes to ensure that children and young people with SEN and/or LD have their needs identified at the earliest opportunity is underway; • A review of the current quality assurance for health input to EHCPs is underway; • Special Education Needs Area join inspections are imminent for both Hampshire and the Isle of Wight. A SEN/Health steering group has been established and self-evaluations are complete. Commissioners have a clear understanding of CCG duties;
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Accountability and Transparency

Approval and monitoring of the Children and Young People’s Mental Health Local Transformation Plan.



- Continued progress against the Mental Health Local Transformation Plan will be supported by the Hampshire ‘Starting Well for Emotional Wellbeing and Mental Health Partnership’ and, the Isle of Wight ‘Mental Health and Emotional Wellbeing Transformation Group (CYP)’;
- These groups will meet quarterly. Attendees are invited to attend both meetings;
- Priorities for both groups will be aligned with attendees focusing on local issues which impact on progress against the Local Transformation Plan.

Local Transformation Plan Approval

This plan will be discussed at the following meetings:

Meeting	Date
Hampshire Starting Well for Emotional Wellbeing and Mental Health	14 th October 2019
IOW Mental Health and emotional Wellbeing Transformation Group	15 th October 2019
IOW Integrated Commissioning Board	7 th November 2019
Hampshire County Council Joint Commissioning Board	11 th November 2019
Hampshire Children and Young People’s Select Committee	20 th November 2019
IOW Childrens Trust Board	28 th November 2019
HIOW STP Childrens Programme Board	21 st November 2019

KLOEs Summary

NHS England have issued national guidance which supports the refresh of Children and Young People's Mental Health and Wellbeing (CYP MHWB) Local Transformation Plans (LTPs) for 2019/20. It builds on the initial Key Lines of Enquiry (KLoEs) developed in 2015 to support the original LTPs.

The aim was to confirm that there is transparent commitment and local engagement to deliver existing planning commitments for CYP MHWB and to make the necessary preparations for future years in line with the Five Year Forward View for Mental Health and the recently published NHS Long Term Plan.

The guidance uses a RAG (Red, Amber, Green) rating system to assess progress.

- **Green – Fully confident:** Objective clearly identified and delivered. All requirements in place.
- **Amber – Partially confident:** Objective not clearly identified, some requirements in place or plans/actions require strengthening.
- **Red – Not confident:** Objective not identified or no confidence that actions will result in requirements being achieved.

The review of these KLOEs will assess that identified actions and intentions are progressing and are supported by a substantive, transparent and system-wide commitment to meet the KLOEs.

The table below is summary of Hampshire and Isle of Wight's current self-assessment of our 'Red' KLOEs which we will work to improve our evidence for in 2020/21.

Understanding Need

- We need to work on linking our data requirements with the local authorities and be able to accurately describe the our mental health and emotional support services are meeting the needs of children and young people across Hampshire and isle of Wight.

Ambition

- We need to be clearer regarding our action planning, our future funding commitments and identifying agencies that we would use through the action plan
- We need to be more signed on the transitions CQUIN
- We need to have clear plans in place as we move towards outcomes based reporting

Health and Justice

- Need to work better with colleagues to support transition on health and justice grounds

Crisis

- Need further evidence that shows the re-profiling of inpatient expenditure into community provision.



Glossary

Attention Deficit Hyperactivity Disorder	Symptoms include chronic problems with inattention, impulsivity and hyperactivity.
Attachment Disorder	A broad term that is used to describe a series of emotional and behavioural problems that can develop in young children who struggle to form expected bonds to primary caregivers, usually their parents.
Autistic Spectrum Condition	Complex disorder of brain development characterised by difficulties with social interaction, verbal and non-verbal communication and repetitive behaviours.
Adverse Childhood Experiences/Trauma Informed	Adverse childhood experiences are stressful or traumatic events, including abuse and neglect. They may also include household dysfunction such as witnessing domestic violence or growing up with family members who have substance use disorders.
Avoidant Restrictive Food Disorder	Avoidant Restrictive Food Disorder (ARFID) is defined as a restriction of a person's own eating by consuming smaller amounts of food, or by avoiding certain foods or entire food groups. ARFID differs significantly from bulimia or anorexia in that it is not always accompanied by weight loss. It appears to be more prevalent among younger children (2-12 year olds) as well as those with autism, anxiety, and ADHD. Left untreated, ARFID can lead to malnutrition.
Child and Adolescent Mental Health Service	Children and Adolescent Mental Health Services (CAMHS) are made up of specialist teams offering assessment and treatment to children and young people up to age 18 who have emotional, behavioural or mental health problems. Services are also provided for children and young people with eating disorders.
Frankie Workers	The Frankie Workers provide a therapeutic counselling for children and young people up to age 18 years who have experienced trauma through being missing, exploited, trafficked or sexually abused.
Willow Team	The Willow Team is a Hampshire Council Team within Children Services working within specialist Missing, Exploited and Trafficked children.
Mental Health Service Data Set	The Mental Health Service Data Set (MHSDS) is a patient level, output based, secondary uses data set which delivers robust, comprehensive, nationally consistent and comparable person-based information for children, young people and adults who are in contact with Mental Health Services.
New Care Models	The New Care Models seeks to address this fragmentation by empowering local systems to work together through Provider Collaboratives, with a view to reducing the number of people who are cared for out of area and creating the services their population need through local re-investment. This will enable providers to better address health inequalities and tailor services to local needs
Neurodevelopmental Disorders / Conditions	Neurodevelopmental disorders are impairments of the growth and development of the brain or central nervous system. A narrower use of the term refers to a disorder of brain function that affects emotion, learning ability, self-control and memory and that unfolds as an individual develops and grows. Autistic Spectrum Conditions and Attention Deficit Hyperactivity Disorder are examples of neuro-developmental conditions.
Think Family	Think Family is the approach used by the Troubled Families programme to encourage services to deal with families as a whole, rather than responding to each problem, or person, separately.
Troubled Families	Troubled Families is a programme of targeted intervention for families with multiple problems, including crime, anti-social behaviour, truancy, unemployment, mental health problems and domestic abuse.
Sustainability and Transformation Partnerships.	In 2016, NHS organisations and local councils joined forces in every part of England to develop proposals for improved health and care. They formed new partnerships – known as sustainability and transformation partnerships (STPs) – to run services in a more coordinated way, to agree system-wide priorities, and to plan collectively how to improve residents' day-to-day health. Partnerships published their initial proposals in 2016 which have since continued to develop to reflect local priorities, views from people who use and provide services, elected representatives and local voluntary organisations.



CS50337 NHS Creative 2019



The right care at the right time, in the right place for local people